

Behavioral Health Services

A Division of Health Care Services Agency

Genevieve G. Valentine, LMFT, Directo Fay Vieira, LMFT, BHS Assistant Director - Clinic Cara Dunn, BHS Assistant Director - Administrative

County and Contract Medi-Cal Providers Directory

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

This Document is Searchable

To search use Ctrl+F (or Command+F on Mac)
Search by First Name Only, Last Name Only, or Program Name

English

ATTENTION: If you speak another language, language assistance services, free 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

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

<u>Tagalog (Tagalog – Filipino)</u>

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

<u>한국어 (Korean)</u>

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

繁體中文(Chinese)

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

ՈԻՇԱԴՐՈԻԹՅՈԻՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ։ 2անգահարեք 468-9370 (TTY (հեռատիպ)՝ 711).

Русский (Russian)

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

فارسى

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

日本語 (Japanese)

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-88468-9370 (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 dav 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। 888-468-9370 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برق 9370-468-388 (TTY: 711)

हिंदी

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-88 468-9370 (TTY: 711) पर कॉल करें।

<u>ภาษาไทย (Thai)</u>

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

ខ្មែរ (Cambodian)

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

<u>ພາສາລາວ</u>

<u>(Lao)</u>

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ[,] ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ[,] ໂດຍບໍ່ເສັງຄ່າ[,] ແມ່ນມີພ້ອມໃຫ້ທ່ານ· ໂທຣ 1-888-468-9370 (TTY: 711). 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 workly under the direction of a licensed practitioner operating within their scope of practice. O licensed, waivered, or registered mental health providers and licensed substance use

MH = Mental Health Progam and Practitioners

SUD = Substance Use Disorder Program and Practitioners

 \triangle = Provider is accepting new beneficiaries

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

NPI = National Provider Identifier number

CC = Cultural Competency Training completed

ICC = intensive Care Coordination

IHBS = Intensive Home Based Services

ASL = *American Sign Language

10398

| Program Name: Access Managed Care Type of Program: MH and Address 620 N Aurora City Stockton, CA 95202 | | Program Description: Screenings for treatment of mental health symptoms and/ or substance use concerns, Case Management/Brokerage & Mental Health Services | | | |
|---|---------------|--|---|-----------|--|
| Phone Number 9370 | r: (209) 468- | Populations served: All ages | | | |
| ۵Ł | | Cultural Abilities: Culturally competent service provided to all callers. | | | |
| Non-English Languages:Spa interpreter services | | Office Hours: Sunday - Saturday 24 Hours per day, 365 days website: https://www.sjcbhs.org | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Bagdonas | Michelle | 1164765137 | Substance Use Disorder Certified Counselor Certified Alcohol and Drug | 7764 | |
| Beas | Sandra | 1821435447 | Counselor Substance Use Disorder Certified | 128141 | |
| Crummett | Tamara | 1811037807 | Counselor II - Clinical Supervisor | 7541 | |
| Garcia | Luic | | Licensed Marriage and Family | | |

Therapist

Garcia

1346599677

Luis

| Program Name: Black | | Program Desc | ription: Case Management/ Brokerage in | cluding |
|---------------------|----------|---------------------|--|-----------|
| Wieland | Jessica | 1164751392 | Licensed Professional Clinical Counse | 173 |
| Richardson | Douglass | 1609346402 | Certified Alcohol and Drug Counselo | Bii006402 |
| Nease | Desiree | 1447703491 | Associate Clinical Social Worker | 107413 |
| Morales | Michelle | 1902397581 | Counselor | 14319 |
| | | | Substance Use Disorder Certified | |
| Martinez | Adriana | 1831669480 | Associate Clinical Social Worker | 120727 |
| Guerrero | Melissa | 1467946301 | Licensed Marriage and Family Thera | 81226 |

Program Name: Black Awareness Community Outreach Program / Multicultural Services. (BACOP/MC) Full Service Partnership (MHSA) #9090.

Type of Program: MH Address 1212 N. California City Stockton, CA 95202 Phone Number (209) 468-2337 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: Adults

| | | Cultural Abilities: African American, Native American, Muslim/Middle Eastern and Gay/Lesbian/Transgender communities | | | |
|--|--|---|--|-----------|--|
| | Non-English Languages: Hi Punjabi, Urdu, Pashto, Englis | | Office Hours: Monday -Friday 8 am - 5 pm h, | | |
| Spanish | | website: https:// | www.sjcbhs.org/adult.aspx | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Cruz | Gloria | 1104375724 | Registered Nurse | 723203 | |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 | |
| Program Name: CARES+ Type of Program: MH Address 620 N. Aurora St. Ste 305 & 306 City Stockton, CA 95202 | | Management/Brokerage, screenings for treatment of mental health symptoms to children, youth, and families within the community. | | | |
| Phone Number 2385 | r: (209) 468- | Populations se | erved: Children and Youth | | |
| △ Ł | | Cultural Abilities: Comprhensive Mental Health services provided for children, youth, and families that are sensitive and accomodating to the gender identification, sexual orientation, linguistic, generational, and physical needs of each individual served. | | | |
| Non-English La | anguages: | Office Hours: N | Monday-Friday 8:00am-5:00 |)pm | |

| Spanish | | website: https://www.sjcbhs.org/children_and_youth.aspx | | | |
|---|------------|---|--|------------------|--|
| Last Name | First Name | NPI | Type of License | License # | |
| Flores | Courtney | 1851437735 | Licensed Clinical Social Worker | 29811 | |
| | | | Licensed Marriage and Family | | |
| Hudson | Mark | 1528190725 | Therapist | 78609 | |
| | | | Licensed Marriage and Family | | |
| Lopez | Alexis | 1932767225 | Therapist | 116153 | |
| and Youth Services, Stockton Clinic (CYS) #3915 Type of Program: MH Address 1414 N California City Stockton, CA 95202 | | | Coordination (ICC); Mental Health Serve Based Services (IHBS); Medication S | • | |
| Phone Number: (209) 468- 2385 | | Populations served: Children and Youth | | | |
| <u>∆</u> &. | | youth, and their | ies: Comprehensive mental health serving families living in Central County area. Suroup therapy, case management, psychosupport. | Services include | |

| Non-English Languages:Spa Office Hours: Monday - Friday 8 am to 5 pm | | | | | |
|--|------------|---|------------------------------------|-----------|--|
| | | website: https://www.sjcbhs.org/children_and_youth.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| | | | Associate Marriage and Family | | |
| Abdullahi | Krissie | 1407307762 | Therapist | 125000 | |
| Alban | Benjamin | 1932227295 | Licensed Clinical Social Worker | 26094 | |
| Avilla | Eugene | 1073396560 | N/A | N/A | |
| Barajas | Lauren | 1154893683 | Licensed Clinical Social Worker | 214887 | |
| | | | Licensed Marriage and Family | | |
| Boklund | Maria | 1396157061 | Therapist | 48496 | |
| | | | Associate Marriage and Family | | |
| Corral | Mercedes | NA | Therapist | 135632 | |
| | | | Licensed Marriage and Family | | |
| Curtiss | Megan | 1265836027 | Therapist | 123655 | |
| Demers | Jenifer | 1386124436 | Associate Clinical Social Worker | 114558 | |
| Dhillon | Gipanjot | 1013446046 | Physician | A21935 | |
| Diaz | David | 1821585308 | Licensed Marriage and Family Thera | 129095 | |
| Gonzalez | | | Associate Marriage and Family | | |
| Barragen | Stephanie | 1538808266 | Therapist | 142162 | |

| | | | Associate Professional Clinical | |
|------------|-----------|------------|------------------------------------|----------|
| Hall | Tondria | 1770160152 | Counselor | 13978 |
| Hudson | Mark | 1528190725 | Licensed Marriage and Family Thera | 78609 |
| Kumar | Gaurav | 1235513102 | Physician | A151187 |
| | | | Associate Marriage and Family | |
| Lopez | Alexis | 1932767225 | Therapist | 116153 |
| | | | Licensed Marriage and Family | |
| Martin | Alandrea | 1235696006 | Therapist | 131594 |
| Navarro | Elizabeth | 1801242771 | Associate Clinical Social Worker | 103985 |
| Reyes | Irene | 1760189534 | Asssociate Clinical Social Worker | 111415 |
| Rhone | Danevia | 1114650405 | Associate Clinical Social Worker | 99637 |
| Saluja | Amandeep | 1588894778 | Physician | C175781 |
| Santiago | Regina | 1598166308 | Licensed Clinical Social Worker | 110173 |
| Shah | Benita | 1407311103 | Associate Social Worker | 125290 |
| Simien | Carla | 1629564000 | Licensed Psychiatric Techician | 40771 |
| Tiano | Mark | 1841623535 | Licensed Clinical Social Worker | 88442 |
| Washington | Kerry | 1689391997 | Registered Nurse | RN559931 |
| White | Grace | 1659146371 | Associate Clinical Social Worker | 113407 |

| Yang | Mai | 1447866090 | Associate Clinical Social Worker | 105295 |
|--|------------|---------------------------------|---|-----------|
| Program Name: Children and Youth Services - Foster Youth Full Service Partnership (MHSA) #9096 Type of Program: MH Address: 620 N. Aurora City: Stackton, CA 95202 | | | es including | |
| City: Stockton, CA 95202 Phone Number: (209) 468- 2385 | | Populations se | erved: Children and Youth | |
| 스夫 Non-English Languages:Spa | | on children and Office Hours: I | es: Mental Health Services Act (MHSA) production the Foster Care System Monday - Friday 8:00 am - 5:00 pm www.sjcbhs.org/children_and_youth.asp | |
| Last Name | First Name | NPI | Type of License | License # |
| Allanki | Sailaja | 1306897723 | Physician | 138838 |
| Ansari | Shaukat | 1821294455 | Physician | 105923 |
| Barajas | Lauren | 1154893683 | Licensed Clincial Social Worker | 101688 |

| Program Name: SJC Children and Youth | | Program Description: Case Management/Brokerage including Intensive Care Coordination (ICC), Mental Health Services including | | |
|--------------------------------------|----------|--|-------------------------------------|--------|
| | | 1982395760 | Associate Clinical Social Worker | 119854 |
| Pinon | Karen | 1518572320 | Counselor | 10658 |
| | | | Associate Professional Clinical | |
| Payne | Sheilena | 1336437656 | Licensed Marriage and Family Thera | 94571 |
| Olivares-Riva | Yulisa | 1801445085 | Associate Clinical Social Worker | 96813 |
| Lopez | Alexis | 1932767225 | Licensed Marriage and Family Thera | 141235 |
| Herron | Rita | 1659629285 | Licensed Marriage and Family Thera | 117262 |
| Gutierrez | Antonio | 1023473469 | Licensed Clinical Social Worker | 71535 |
| Gomez-Boulv | Salena | 1679098776 | Licensed Marriage and Family Thera | 139138 |
| Dominguez | Maria | 1619515640 | Associate Marriage and Family Thera | 130181 |
| Del Toro | Jose | 1578058681 | Licensed Marriage and Family Thera | 120167 |
| Cupit | Christy | 1386286383 | Associate Marriage and Family Thera | 120662 |
| Castaneda-Je | Renessa | 1376664862 | Licensed Marriage and Family Thera | 81528 |

Program Name: SJC Children and Youth Services - Foster Youth Full Service Partnership (MHSA) Intake #39DF Program Description: Case Management/Brokerage including Intensive Care Coordination (ICC), Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention

Type of Program: MH

Address: 333 E.

| City: Stockton, CA 95202 Phone Number: (209) 468- 1547 스동 Non-English Languages: Sp | | Cultural Abiliti on children and | erved: Children and Youth es: Mental Health Services Act (MHSA) p youth in the Foster Care System | rogram focus |
|---|--------------|---|--|--------------|
| Tron English E | anguagoo. Op | Office Hours: Monday - Friday 8:00 am - 5:00 pm website: https://www.sjcbhs.org/children_and_youth.aspx | | |
| Last Name | First Name | • | Type of License | License # |
| Alvarado | Jorie Mae | 1760156640 | Associate Clinical Social Worker | 125696 |
| Blanco | Clara | 1679823900 | Licensed Marriage and Family Thera | 146299 |
| Gipaya | Juanita | 1235500042 | Licensed Marriage and Family Thera | 126901 |
| Heidenberg | Bradley | 1255764627 | Licensed Marriage and Family Thera | 98495 |
| Morris | Allie | 1982305165 | Associate Marriage and Family Therapist | 136814 |
| Pollock | Leora | 1245663426 | Licensed Clinical Social Worker | 75192 |
| Program Name: Community Adult Treatment Services (CATS - Teams A, B, and D) #9069 | | Intensive Care | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Service Based Services (IHBS); Medication Sup | es including |

Type of Program

St.

City: Stockton, CA 95202

Phone Number: (209) 468-

8842;

(209) 468-8862; (209) 468-

8881

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Non-English Languages:

Spanish, Cantonese,

Tagalog

Populations served: Adult

Cultural Abilities: Comprehensive Mental Health Services for adults (60). Services include psychiatric assessment, medication support, groindividual therapy and case management.

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

Website: https://www.sjcbhs.org/adult.aspx

| Last Name | First Name | NPI | Type of License | License # |
|--------------|------------|------------|------------------------------------|-----------|
| Aguirre Luna | Mayra | 1285007179 | Licensed Marriage and Family Thera | 144333 |
| Amador | Keith | 1891127403 | Licensed Marriage and Family Thera | 102725 |
| Chavez | April | 1760959670 | Licensed Marriage and Family Thera | 113250 |
| Cholua | Marie | 1275098055 | Licensed Marriage and Family Thera | 139853 |

| | | | | ī |
|-----------|---------|---------------------------------------|-------------------------------------|--------|
| Chukwuka | Ogiram | 1063662781 | Licensed Clinical Social Worker | 81785 |
| Cupit | Christy | 1386286383 | Associate Marriage and Family Thera | 120662 |
| DeWitte | Tiffany | 1023143245 | Licensed Clinical Social Worker | 29826 |
| Doronio | Ramil | 1871767376 | Registered Nurse | 555151 |
| Ekpkai | Tsola | 1518603927 | Associate Clinical Social Worker | 94485 |
| Flores | Henry | 1998038657 | Licensed Marriage and Family Thera | 128269 |
| Garcia | Valerie | 1770606386 | Registered Nurse | 704233 |
| Gementera | Jalessa | 1588134209 | Associate Marriage and Family | 118468 |
| Graff | Robert | 1366560112 | Physician | G70479 |
| Helsby | Sherri | 1669893764 | Licensed Clinical Social Worker | 29248 |
| Herrera | Karla | 1427722461 | Associate Professional Clinical | 102359 |
| Herrick | Kara | 1518191659 | Licensed Marriage and Family | 43283 |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 |
| Hudson | Dana | 1225172489 | Licensed Marriage and Family | 6556 |
| Jackson | Sasha | 1295181295 | Licensed Clinical Social Worker | 79996 |
| Jonney | Jorly | 1902155625 | Licensed Clincal Social Worker | 65763 |
| Lee | Mai | 1770282824 | Associate Clinical Social Worker | 123987 |
| Martin | Ronee | 1932644796 | Associate Marriage and Family | 84987 |
| Martinez | Celeste | 1902305972 | Licensed Psychiatric Techician | 40655 |
| Mascovich | Paul | 1215921184 | Physician | G33950 |
| McHenry | Heidi | 1861763294 | Licensed Psychiatric Techician | 35949 |
| | · | · · · · · · · · · · · · · · · · · · · | | |

| Mendez | Adeline | 1255453353 | Licensed Psychiatric Techician | 25868 |
|-------------------|-----------|------------|------------------------------------|--------|
| Murray | Karen | 1346735917 | Licensed Marriage and Family Thera | 138441 |
| Padala | Nagamani | 1659303253 | Physician | C53554 |
| Perera | Manoj | 1568470946 | Licensed Clinical Social Worker | 24260 |
| Phillips | Victoria | 1871110437 | Associate Clinical Social Worker | 92751 |
| Rivas-Olivare | Yulisa | 1801445085 | Associate Clinical Social Worker | 96813 |
| Saddik | Fouad | 1437254117 | Physician | A44865 |
| Saelee | Cindy | 1255511614 | Licensed Clinical Social Worker | 82456 |
| Salazar | Kellie | 1295273654 | Licensed Psychiatric Techician | 40326 |
| Cob midt | | | Associate Marriage and Family | 130542 |
| Schmidt | Katarzyna | 1285290346 | Therapist | |
| Soares | Ana | 1922191410 | Physician | A68523 |
| Sprague | Helen | 1710325642 | Licensed Marriage and Family Thera | 75120 |
| Velasquez | Normita | 1609464114 | Licensed Psychiatric Techician | 41847 |
| Mashington | | | Associate Marriage and Family | 127200 |
| Washington | Lorraine | 1639722820 | Therapist | 127280 |
| Weekly | Tony | 1710572540 | Licensed Psychiatric Techician | 41837 |
| \\\/: : o :::: = | | | Associate Professional Clinical | 14222 |
| Williams | Showvon | 1689133464 | Counselor | 14222 |

| | | | Associate Marriage and Family | 127454 |
|---|---------------------------|--|--|-----------|
| Zaragoza | Alejandra | 1346705381 | Therapist | 137454 |
| Program Name: Community Corrections Partnership #39AP | | Program Description: Case Management/ Brokerage; Mental Healtl Services; Medication Support; Crisis Intervention | | |
| Type of Progra Address: 1212 City: Stockton, | N. California | | | |
| Phone Number 9373 | r: (209) 468- | Populations se | erved: Adult | |
| <u></u> ∆& | | with Probation t | es: Serve clients under AB-109 communto reduce recidivism, promote wellness art for our community. | • |
| Non-English La | Non-English Languages:Spa | | Monday - Friday 8:00 am- 5:00 pm | |
| | | · · | /www.sjcbhs.org/adult.aspx | |
| Last Name | First Name | NPI | Type of License | License # |
| Garcia | Julio | 1679961106 | Licensed Marriage and Family Thera | 108163 |
| Molina | Rico | 1255454203 | Licensed Clinical Social Worker | 25450 |

| |] | | Licensed Professional Clinical | | |
|--|--------------|--|--|----------------|--|
| Trahan | Roslyn | 1639839608 | Counselor | 12474 | |
| Program Name: Crisis Community Response Team (CCRT) #9088 Type of Program: MH Address: 1212 N. California City: Stockton, CA 95202 | | | ription: Case Management/ Brokerage; cation Support; Crisis Intervention | Mental Hea | |
| Phone Number 8686 | r:(209) 468- | Populations served: Adult, Children, Adolescents | | | |
| △齿 | | adult mental he | es: Mobile multi-disciplinary crisis team for alth outreach, early intervention and joint ement for crisis 5150 detention evaluation | field response | |
| Non-English La | anguages: Sp | Office Hours: OPEN 24 HOURS | | | |
| Cambodian, Vi | etnamese | website: https://www.sjcbhs.org/crisis_intervention.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Alejo | Stephanie | 1659798130 | Licensed Psychiatric Techician | 37033 | |
| Arriola | Eulalie | 1255573044 | Licensed Psychiatric Techician | 34426 | |
| Avelar | Natalie | 1801524657 | Associate Clinical Social Worker | 120140 | |
| Ballesteros | Patricia | 1790058352 | Licensed Marriage and Family Thera | 108455 | |

| Bareng | Jeff | 1043753478 | Licensed Psychiatric Techician | 40284 |
|-----------|------------|------------|------------------------------------|--------|
| Bazua | Melissa | 1972944072 | Licensed Psychiatric Technician | 36496 |
| Blewett | Jenna | 1437658408 | Licensed Marriage and Family Thera | 136866 |
| Bringas | Carmencita | 1821298753 | Licensed Marriage and Family Thera | 53691 |
| DeJesus | Carolyn | 1861650228 | Licensed Psychiatric Technician | 34221 |
| Douglas | Roy | 1407229248 | Associate Clinical Social Worker | 98897 |
| Estrada | Moses | 1255045726 | Licensed Psychiatric Technician | 32526 |
| Figueroa | Carlos | | Licensed iviarriage and Family | _ |
| riguei oa | Carios | 1306193933 | Therapist | 102315 |
| Garcia | Frank | | Associate Marriage and Family | |
| Garcia | | 1992179352 | Therapist | 118171 |
| Gill | Sandeep | 1871852673 | Licensed Psychiatric Technician | 34942 |
| Guzman | Omar | 1558832712 | Associate Clinical Social Worker | 108999 |
| Isham | Loni | 1891145033 | Licensed Psychiatric Technician | 38233 |
| Ketcham | Shauna | 1841798865 | Licensed Clinical Social Worker | 99975 |
| Lee | Catherine | 1073729646 | Licensed Marriage and Family Thera | 44225 |
| Lewis | Chandra | 1770914061 | Licensed Psychiatric Technician | 37210 |
| Lewman | Brenda | 1821477035 | Licensed Marriage and Family Thera | 106905 |
| McArthur | Milagros | 1477809929 | Licensed Psychiatric Technician | 36471 |
| | | | Associate Professional Clinical | |
| Melgarejo | Angie | 1891220729 | Counselor | 6643 |

| Drawan Description, Cose Management/ Drakerage, Mantal Healt | | | | |
|--|----------|------------|------------------------------------|--------|
| Walsh | Peter | 1134570542 | Therapist | 131513 |
| \\\alab | Datas | | Associate Marriage and Family | |
| Valenzuela | Maira | 1093221087 | Associate Clinical Social Worker | 102953 |
| Tabinas | Vianny | 1770204679 | Associate Clinical Social Worker | 124868 |
| Sumampong | Criselle | 1073121414 | Licensed Psychiatric Technician | 41696 |
| Scharp | Sam | 1508526856 | Licensed Psychiatric Technician | 42150 |
| Price | Jennifer | 1932621893 | Licensed Psychiatric Technician | 40662 |
| Phillips | Heather | 114530250 | Licensed Psychiatric Technician | 41710 |
| Myotte | Wendy | 1265554638 | Licensed Marriage and Family Thera | 84045 |
| Morales | Leonardo | 1962822643 | Licensed Clinical Social Worker | 100000 |
| Molina-Eliab | Sonya | 1497878482 | Licensed Marriage and Family Thera | 109801 |
| Menius | Victoria | 1487074258 | Licensed Psychiatric Technician | 37534 |
| | | | | |

Program Name: Crisis Intervention Services

#9011

Type of Program: MH

Address: 1212 N. California

City: Stockton, CA 95202

|Program Description: Case Management/ Brokerage; Mental Healt| Services; Medication Support; Crisis Intervention

| Phone Number: (209) 468- 8686 | | Populations served: Adult, Children Adolescents | | | | |
|----------------------------------|--------------|---|---|-------------|--|--|
| △よ | | Cultural Abiliti | es: 24-Hour evaluation services including | assessment | | |
| | | psychiatric eme | rgencies, crisis counseling, outpatient and | d community | | |
| Non-English La | anguages: Sp | Office Hours: | 24 HOURS | | | |
| Cambodian, Vi | etnamese | website: https:// | www.sjcbhs.org/crisis_intervention.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | | |
| Alejo | Stephanie | 1659798130 | Licensed Psychiatric Technician | 37033 | | |
| Avelar | Natalie | 1801524657 | Associate Clinical Social Worker | 120140 | | |
| Ballesteros | Patricia | 1790058352 | Licensed Marriage and Family Thera | 108455 | | |
| Bareng | Jeff | 1043753478 | Licensed Psychiatric Technician | 40284 | | |
| Bazua | Melissa | 1972944072 | Licensed Psychiatric Technician | 36496 | | |
| Blewett | Jenna | 1437658408 | Licensed Marriage and Family Thera | 136866 | | |
| | | | | | | |
| Bringas | Carmencita | 1821298753 | Licensed Marriage and Family Thera | 53691 | | |
| DeJesus | Carolyn | 1861650228 | Licensed Psychiatric Technician | 34221 | | |
| Douglas | Roy | 1407229248 | Associate Clinical Social Worker | 98897 | | |
| Estrada | Moses | 1255045726 | Licensed Psychiatric Technician | 32526 | | |
| | | | Licensed Marriage and Family | | | |
| Figueroa | Carlos | 1306193933 | Therapist | 102315 | | |

| | | | Associate Marriage and Family | |
|--------------|-----------|------------|------------------------------------|----------|
| Garcia | Frank | 1992179352 | Therapist | 118171 |
| Gill | Paramijit | 1073629218 | Physician | A49224 |
| Gill | Sandeep | 1871852673 | Licensed Psychiatric Technician | 34942 |
| Graff | Robert | 1366560112 | Physician | G70479 |
| Guzman | Omar | 1558832712 | Associate Clinical Social Worker | 108999 |
| Isham | Loni | 1891145033 | Licensed Psychiatric Technician | 38233 |
| Ketcham | Shauna | 1841798865 | Licensed Clinical Social Worker | 99975 |
| Lee | Catherine | 1073729646 | Licensed Marriage and Family Thera | 44225 |
| Lewis | Chandra | 1770914061 | Licensed Psychiatric Technician | 37210 |
| Lewman | Brenda | 1821477035 | Licensed Marriage and Family Thera | 106905 |
| McArthur | Milagros | 1477809929 | Licensed Psychiatric Technician | 36471 |
| | | | Associate Professional Clinical | |
| Melgarejo | Angie | 1891220729 | Counselor | 6643 |
| | | | | |
| Menius | Victoria | 1487074258 | Licensed Psychiatric Technician | 37534 |
| Molina Eliab | Sonya | 1497878482 | Licensed Marriage and Family Thera | 109801 |
| Morales | Leonardo | 1962822643 | Licensed Clinical Social Worker | 100000 |
| Myotte | Wendy | 1265554638 | Licensed Marriage and Family | 84045 |
| | | | | CO566705 |
| Pate | Kellie | 1609248368 | Substance Abuse Counselor II | 18 |

| Phillips | Heather | 114530250 | Licensed Psychiatric Technician | 41710 |
|-----------------------------|-------------|---------------------|-----------------------------------|---------|
| Price | Jennifer | 1932621893 | Licensed Psychiatric Technician | 40662 |
| Scharp | Sam | 1508526856 | Licensed Psychiatric Technician | 42150 |
| Sumampong | Criselle | 1073121414 | Licensed Psychiatric Technician | 41696 |
| | Vianny | | | |
| Tabinas | Gieng | 1770204679 | Associate Clinical Social Worker | 124868 |
| Tupper | Charles | 1700944121 | Physician | G185940 |
| Valenzuela | Maira | 1093221087 | Associate Clinical Social Worker | 102953 |
| Walsh | Peter | 1134570542 | Associate Marriage and Family | 131513 |
| Program Nam | e: Crisis | Program Desc | ription: Crisis Stabilization CSU | |
| Stabilization U | Jnits (CSU) | | | |
| #9032 | #9032 | | | |
| Type of Program: MH | | | | |
| Address: 1212 N. California | | | | |
| City: Stockton, CA 95202 | | | | |

Populations served: Adult, Adolescents (12 yrs or older)

Cultural Abilities: 23-Hour psychiatric assessment and stabilization u Resources and Referrals are provided during admission and upon

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8686

Phone Number: (209) 468-

| Non-English L | Non-English Languages: Sp ∢Office Hours: OPEN 24 HOURS | | | | |
|---------------|---|--|------------------------------------|-----------|--|
| Cambodian, V | ietnamese | website: https://www.sjcbhs.org/crisis_intervention.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Andrade | Oscar | 1215661145 | Licensed Psychiatric Technician | 42243 | |
| Arroyo | Maria | 1255459061 | Registered Nurse | 488617 | |
| Bareng | Jeff | 1043753478 | Licensed Psychiatric Technician | 40284 | |
| Bokleman | Roy | 111404003 | Licensed Psychiatric Technician | 32628 | |
| Brown | Brandi | 1316060023 | Registered Nurse | 713008 | |
| Cabrera | Gilbert | 1679693766 | Registered Nurse | 565185 | |
| Chavez | Justin | 1396479606 | Licensed Psychiatric Technician | 42379 | |
| Daniel | Steven | 1184366528 | Licensed Psychiatric Technician | 41990 | |
| Dapon | Jeanette | 1780152918 | Registered Nurse | 824521 | |
| DeJesus | Carolyn | 1861650228 | Licensed Psychiatric Technician | 34221 | |
| Garcia | Francisco | 1538899620 | Licensed Psychiatric Technician | 42266 | |
| Garcia | Jazmin | 1225763642 | Licensed Psychiatric Technician | 42290 | |
| Gonzalez | Frank | 1447924923 | Registered Nurse | 95154361 | |
| Graff | Robert | 1366560112 | Physician | G70479 | |
| Guzman | Omar | 1558832712 | Associate Clinical Social Worker | 108999 | |
| Hardy | Denise | 1912202813 | Licensed Psychiatric Technician | 33714 | |
| Hawkins | Lynnetta | 1437436938 | Licensed Marriage and Family Thera | 93110 | |
| Holguin | Gagriel | 1255704094 | Licensed Psychiatric Technician | 38216 | |

| Holmes | Sherronya | 1205214228 | Licensed Psychiatric Technician | 37605 |
|-----------|-----------|------------|---------------------------------------|-----------|
| Kaur | Narinder | 1063006294 | Licensed Psychiatric Technician | 41886 |
| Kottke | Marline | 1891223111 | Licensed Vocational Nurse | 198957 |
| Laizer | Gloria | 1255706479 | Registered Nurse | 764452 |
| Lambert | Rekha | 1164647525 | Licensed Marriage and Family Thera | 10386 |
| Little | Christy | 1497978795 | Licensed Psychiatric Technician | 28731 |
| Lo | Muacong | 1689300857 | Licensed Marriage and Family Thera | 42402 |
| Lo | Pa | 1295377117 | Licensed Psychiatric Technician | 41128 |
| | | | Licensed Marriage and Family | |
| Maldonado | Adan | 1063878825 | Therapist | 139560 |
| Martin | Kaitlyn | 1548959802 | Licensed Psychiatric Technician | 42399 |
| Mendoza | Michelle | 1477951812 | Registered Nurse | 797022 |
| Michael | Kimberly | 1538831151 | Licensed Psychiatric Technician | 29086 |
| Mocko | James | 1558726224 | Licensed Psychiatric Technician | 38249 |
| | D 4: 1 | | Associate Marriage and Family | |
| Montantes | Michael | 1780018390 | Therapist | 146645 |
| Navarro | Grace | 1083737753 | Licensed Clinical Social Worker | 91433 |
| Nguyen | Thao | 1912214065 | Licensed Marriage and Family Thera | 88176 |
| Nguyen | Thao | 1912214065 | Licensed Professional Clinical Counse | 2720 |
| Pate | Kellie | 1609248368 | Substance Abuse Counselor | CO5667051 |
| Rios | Teri | 1942323829 | Licensed Psychiatric Technician | 29213 |

| Salon | Jennifer | 1730702119 | Licensed Psychiatric Technician | 41462 |
|------------|----------|------------|----------------------------------|----------|
| Seraypheap | Arunny | 1013037274 | Registered Nurse | 547944 |
| Sesante | Maria | 1851515720 | Licensed Psychiatric Technician | 30936 |
| Smith | Jerry | 1952111668 | Licensed Psychiatric Technician | 42177 |
| Smith | Maria | 1821624156 | Licensed Psychiatric Technician | 41522 |
| Sous- | | | | |
| Figueroa | Sokchear | 1316187362 | Registered Nurse | 95268104 |
| | | | Associate Marriage and Family | |
| Stephens | Julie | 1376678722 | Therapist | 134410 |
| | | | Associate Professional Clinical | |
| Stephens | Julie | 1376678722 | Counselor | 12831 |
| Tran | Michelle | 1366642068 | Licensed Clinical Social Worker | 81278 |
| Tuning | Frankie | 1073631727 | Registered Nurse | 95171895 |
| Tupper | Charles | 1700944121 | Physician | G185940 |
| Vang | Mai | 1982103081 | Licensed Psychiatric Technician | 40697 |
| Varquez | Sharon | 1366682387 | Licensed Psychiatric Technician | 34435 |
| Villasenor | Kendra | 1447518204 | Licensed Psychiatric Technician | 36449 |
| Walter | Taffie | 1134570542 | Licensed Psychiatric Technician | 32090 |
| Warfield | Gena | 1578928974 | Associate Clinical Social Worker | 120885 |

| ngela | 1083002992 | Registered Nurse | 701021 | |
|------------|--|--|--|--|
| | | | | |
| ody | 1538584859 | Licensed Psychiatric Technician | 37819 | |
| orensic | Program Description: Case Management/ Brokerage; Mental Healtl | | | |
| e | | | | |
| SA) | | | | |
| | | | | |
| МН | | | | |
| California | | | | |
| | | | | |
| 09) 468- | | | | |
| | Populations served: Adult | | | |
| | Cultural Abilities: Provides comprehensive psychiatric and integrative | | | |
| | services to address the needs of Mentally III Offenders. | | | |
| uages: Sp | Office Hours: Monday - Friday 8:00 am- 5:00 pm | | | |
| | website: https:// | www.sjcbhs.org/index.aspx | | |
| st Name | NPI | Type of License | License # | |
| cio | 1841720349 | Associate Clinical Social Worker | 78314 | |
| lio | 1679961106 | Licensed Marriage and Family Thera | 108163 | |
| | dy forensic A) WH California 95202 99) 468- uages: Sp st Name cio | dy 1538584859 Forensic Services; Medical Services; Medical Services; Medical Services Medic | dy 1538584859 Licensed Psychiatric Technician Program Description: Case Management/ Brokerage; Services; Medication Support; Crisis Intervention MH California 95202 19) 468- Populations served: Adult Cultural Abilities: Provides comprehensive psychiatric a services to address the needs of Mentally III Offenders. Lages: Sp Office Hours: Monday - Friday 8:00 am- 5:00 pm website: https://www.sjcbhs.org/index.aspx St Name NPI Type of License Cio 1841720349 Associate Clinical Social Worker | |

| | | | Associate Marriage and Family | |
|--------------------|---------------|-------------------------|---|--------------|
| Regalado | Berenice | 1376027656 | , | 135946 |
| Resendiz- | Jasmine | 1326542879 | Associate Professional Clinical Couns | 14224 |
| Program Nam | e: Gaining | Program Desc | ription: Case Management/ Brokerage; | Mental Healt |
| Older Adult Li | ife Skills | Services; Medi | cation Support; Crisis Intervention | |
| (G.O.A.L.S. 75 | 5/23) Full | | | |
| Service Partne | ership | | | |
| (MHSA) #9 | 093 | | | |
| T (D | N 41 1 | | | |
| Type of Progra | ım: MH | | | |
| Address, 1010 | N. California | | | |
| Address: 1212 | | | | |
| City: Stockton, | CA 95202 | | | |
| Phone Number | r: (209) 468- | Populations se | erved: Older Adult | |
| 3760 | | | | |
| | | Cultural Abiliti | es: Full Service Partnership with the emp | hasis on |
| ۵Ł | | outreach to the | underserved older adult population ages | (60+) |
| Non-English La | anguages: S | Office Hours: | Monday - Friday 8:00 am- 5:00 pm | |
| Train English Ed | | • | www.sjcbhs.org/adult.aspx | |
| | | | 9. s.s.s.s.p. | |

| Last Name | First Name | NPI | Type of License | License # | |
|----------------------------------|------------|---|---------------------------------|-----------|--|
| Resendez | Cynthia | 1780877845 | Physician | A84098 | |
| Program Name: Housing | | Program Description: Case Management/ Brokerage; Mental Health | | | |
| Services #39BE | | Services; Crisis Intervention | | | |
| Type of Program: MH | | | | | |
| Street | | | | | |
| City: Stockton, CA 95202 | | | | | |
| Phone Number: (209) 468- 8880 | | Populations served: Adult | | | |
| | | Cultural Abilities: Transitional housing program focusing on engaging | | | |
| <u></u> | | the target population and facilitating prgress in recovery. | | | |
| Non-English Languages: | | Office Hours: Monday - Friday 8:00 am- 5:00 pm | | | |
| | | website: https://www.sjcbhs.org/adult.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Jackson | Sasha | 1295181295 | Licensed Clinical Social Worker | 96641 | |
| | | | Associate Marriage and Family | | |
| Murray | Karen | 1346735917 | Therapist | 138441 | |
| | | | Associate Marriage and Family | | |
| Washington | Lorraine | 1639722820 | Therapist | 127280 | |

Program Name: InSPIRE (MHSA) #39AN

Type of Program: MH

Address: 1212 N. California City: Stockton, CA 95202 Phone Number: (209) 468-

8888

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Non-English

Languages:Spanish,

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

Populations served: Adult

Cultural Abilities: MHSA innovation component providing learning

community opportunities to specialized cohorts.

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

website: https://www.sjcbhs.org/index.aspx

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|------------------------------------|-----------|
| Brown | Monique | 1962641050 | Licensed Marriage and Family Thera | 46467 |
| | | | Associate Professional Clinical | |
| Galvan | Abraham | 1386349165 | Counselor | 17103 |
| | | | Associate Marriage and Family | |
| Johnson | Elizabeth | 1730919010 | Therapist | 149281 |

Program Name: La Familia Clinic Full **Service Partnership** (MHSA) #9092

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

Type of Program: MH

Address: 1212 N. California City: Stockton, CA 95202

Phone Number: (209) 468-

2335

Populations served: Adult - Focus on Latino outreach and access.

Cultural Abilities: Psychiatric assessment, case management, medication support, individual and group therapy with a special empha on serving Spanish-speaking persons

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Non-English Languages: Spatcher Hours: Monday - Friday 8:00 am- 5:00 pm

website: https://www.sjcbhs.org/adult.aspx

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|------------------------------------|-----------|
| Amador | Keith | 1891127403 | Licensed Marriage and Family Thera | 102725 |
| Cruz | Gloria | 1104375724 | Registered Nurse | 723203 |
| Fernandez | Jane | 1194799395 | Physician | A93060 |

| | | | Associate Marriage and Family | | |
|--|---------------------------------|-------------------------------|---|--------|--|
| Flores | Henry | 1992038657 | Therapist | 123887 | |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 | |
| Hudson | Dana | 1225172489 | Licensed Marriage and Family Thera | 82994 | |
| Resendez | Cynthia | 1780877845 | Physician | A84098 | |
| Smith | Pamela | 1902889694 | Physician | G84663 | |
| Graham Child Shelter #9008 Type of Progra Address: 6861 | Graham Children's Shelter #9008 | | Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention | | |
| Phone Number: (209) 468- 6966 | | Populations se | erved: Children and Youth | | |
| 다는 residents of Ma Non-English Languages: Office Hours: | | residents of Ma Office Hours: | es: Provides outpatient mental health serry Graham Children's Shelter. 24 HOURS Monday through Friday 8-5 pt | | |
| | | website. https:// | /marygrahamfoundation.org/ | | |

| Last Name | First Name | NPI | Type of License | License # |
|---|---|---|--|--------------|
| Agans | Adrianna | 1851831242 | Licensed Marriage and Family Thera | 131299 |
| Kumar | Gaurav | 1235513102 | Physician | A151187 |
| Torres | Josephine | 1467018044 | Licensed Marriage and Family Thera | 144676 |
| | | | | RN559931 |
| Washington | Kerry | 1689391997 | Registered Nurse | 0 |
| Yocham | Amanda | 1326103516 | Licensed Marriage and Family Thera | 79068 |
| TAY FSP #39 Type of Progra Address: 1212 City: Stockton, | Program Name: MHSA TAY FSP #39B1 Type of Program: MH Address: 1212 N. California City: Stockton, CA 95202 | | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Service Based Services (IHBS); Medication Sup | es including |
| Phone Number 2335 | ·:(209) 468- | Populations served: Adults | | |
| 습長 Non-English Languages: | | Cultural Abilities: Full service partnership providing outpatient menta health services Office Hours: Monday - Friday 8:00 am- 5:00 pm website: https://www.sjcbhs.org/index.aspx | | |
| Last Name | First Name | NPI | Type of License | License # |

| | - · | 4540602027 | | 0.4.405 | |
|-------------------------------|----------------|--|---|---------------|--|
| Ekpokai | Tsola | 1518603927 | Associate Clinical Social Worker | 94485 | |
| C ala sacial# | | | Associate Marriage and Family | | |
| Schmidt | Katarzyna | 1285290346 | Therapist | 130542 | |
| | | | Associate Professional Clinical | | |
| Williams | Showvon | 1689133464 | Counselor | 14222 | |
| Program Nam | e: Older | Program Desc | ription: Case Management/ Brokerage; | Mental Health | |
| Adult Services #3980 | s (OAS) | Services; Medi | cation Support; Crisis Intervention | | |
| Type of Progra | | | | | |
| Address: 1212 City: Stockton, | | | | | |
| Phone Number | | | | | |
| 3760 | . (209) 400- | Populations served: Older Adult | | | |
| | | Cultural Abilities: Comprehensive Behavioral Health Services for old | | | |
| | | adults (60+) provided by a multidisciplinary team. Services include | | | |
| <u></u> | | ' ' | essment, medication support, group, indiv | idual therapy | |
| ΔŁ. | | and case mana | | | |
| Non-English La | anguages: | Office Hours: Monday - Friday 8:00 am- 5:00 pm | | | |

| Spanish, Cambodian, Vietnamese | | website: https://www.sjcbhs.org/older_adult.aspx | | | | |
|---|---------------|--|--|--------------|--|--|
| Last Name | First Name | NPI | Type of License | License # | | |
| Chukwuka | Ogiram | 1063662781 | Licensed Clinical Social Worker | 81785 | | |
| House | Tracy | 1720503550 | Licensed Psychiatric Technician | 32050 | | |
| Resendez | Cynthia | 1780877845 | Physician | A84098 | | |
| | | | Associate Professional Clinical | | | |
| Stephens | Sonya | 1558020123 | Counselor | 11864 | | |
| Tracy | Kelly | 1508510033 | Associate Clinical Social Worker | 117056 | | |
| Vales | Kevin | 1952525909 | Licensed Marriage and Family Thera | 79770 | | |
| Pathways to Wellbeing Care Co | | Care Coordinati | ription:Case Management/ Brokerage indicated in (ICC); Mental Health Services including ervices (IHBS); Medication Support; Cris | ng Intensive | | |
| Type of Program: MH Address: 620 N. Aurora | | | | | | |
| City: Stockton, CA 95202 | | | | | | |
| Phone Number | r: (209) 468- | Population Served: Children and Youth | | | | |

| | | Cultural Abilities: Provides in-home and in-community outpatient med | | | | |
|----------------|--|--|------------------------------------|-----------|--|--|
| <u>△</u> Ł | | health services to W&I Code 300 dependent SJC children | | | | |
| Non-English La | anguages: Spa | Office Hours: Monday - Friday 8:00 am - 5:00 pm | | | | |
| | website: https://www.sjcbhs.org/index.aspx | | | | | |
| Last Name | First Name | NPI | Type of License | License # | | |
| Barajas | Lauren | 1154893683 | Licensed Clinical Social Worker | 101688 | | |
| Castaneda- | | | Licensed Marriage and Family | | | |
| Jensen | Renessa | 1376664862 | Therapist | 81528 | | |
| | | | Associate Marriage and Family | | | |
| Cupit | Christy | 1386286383 | Therapist | 120662 | | |
| Del Toro | Jose | 1578058681 | Licensed Marriage and Family Thera | 120167 | | |
| Gomez | Salena | 1679098776 | Licensed Marriage and Family Thera | 139138 | | |
| Gutierrez | Antonio | 1023473469 | Licensed Clincial Social Worker | 71535 | | |
| Herron | Rita | 1659629285 | Licensed Marriage and Family Thera | 117262 | | |
| Lopez | Alexis | 1932767225 | Licensed Marriage and Family Thera | 141235 | | |
| Payne | Sheilena | 1336437656 | Licensed Marriage and Family Thera | 94571 | | |
| | | | Associate Professional Clinical | | | |
| Pinon | Karen | 1518572320 | Counselor | 10658 | | |
| Rivas- | | | | | | |
| Olivares | Yulisa | 1801445085 | Associate Clinical Social Worker | 96813 | | |

Program Name: Peterson Hall #9009

Type of Program: MH

Address: 535 W Matthews

City: French Camp, CA Phone Number (209)468-

14240

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

Populations served: Children and Youth

Cultural Abilities: Provides outpatient mental health services to youth detained at Peterson Hall.

Non-English Languages: Sploffice Hours: Monday - Friday 8:00 am - 8:00 pm

Saturday - Sunday 10:00 am - 7:00 pm

website: https://www.sjcbhs.org/index.aspx

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|-----------|------------|------------|------------------------------------|-----------|
| Last Name | First Name | NPI | Type of License | License # |
| Agans | Adrianna | 1851831242 | Licensed Marriage and Family Thera | 131299 |
| DeLaTorre | Sandra | 1679976229 | Associate Clinical Social Worker | 1122335 |
| Mullen | Alvin Jay | 1336808971 | Licensed Psychiatric Technician | 41866 |
| Pablico | Shiella | 1588036321 | Licensed Psychiatric Technician | 37620 |
| Shabneet | Hira Brar | 1851598452 | Physician | A112447 |
| Yocham | Amanda | 1326103516 | Licensed Marriage and Family Thera | 79068 |
| Zodikoff | Katelyn | 1629418678 | Licensed Marriage and Family Thera | 138440 |

Program Name: Psychiatric Health Facility (PHF) #3976

Type of Program: MH

Address: 1212 N. California City: Stockton, CA 95202 Phone Number: (209) 468-

18686

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Cambodian, Vietnamese

Program Description: Non-Hospital PHF

Populations served: Adult

Cultural Abilities: Inpatient psychiatric hospitalization services

Non-English Languages:Spa Office Hours: OPEN 24 HOURS

website: https://www.sjcbhs.org/psychiatric_health_facility.aspx

| First Name | NPI | Type of License | License # |
|------------|--|--|---|
| Jesse | 1841413036 | Licensed Psychiatric Technician | 29162 |
| Maria | 1255459061 | Registered Nurse | 488617 |
| Jeff | 1043753478 | Licensed Psychiatric Technician | 40284 |
| Roy | 111404003 | Licensed Psychiatric Technician | 32628 |
| Brandi | 1316060023 | Registered Nurse | 713008 |
| Gilbert | 1679693766 | Registered Nurse | 565185 |
| Bena | 1053581116 | Licensed Clincial Social Worker | 65302 |
| | Jesse Maria Jeff Roy Brandi Gilbert | Maria1255459061Jeff1043753478Roy111404003Brandi1316060023Gilbert1679693766 | Jesse 1841413036 Licensed Psychiatric Technician Maria 1255459061 Registered Nurse Jeff 1043753478 Licensed Psychiatric Technician Roy 111404003 Licensed Psychiatric Technician Brandi 1316060023 Registered Nurse Gilbert 1679693766 Registered Nurse |

| Clutario | Dindo | 1164664512 | Licensed Psychiatric Technician | 34295 |
|----------|-----------|------------|------------------------------------|--------|
| Daniel | Steven | 1184366528 | Licensed Psychiatric Technician | 41990 |
| Dapon | Jeanette | 1780152918 | Registered Nurse | 824521 |
| DeJesus | Carolyn | 1861650228 | Licensed Psychiatric Technician | 34221 |
| Gill | Paramijit | 1073629218 | Physician | A49224 |
| Graff | Robert | 1366560112 | Physician | G70479 |
| Harbin | Toni | 1639475049 | Licensed Psychiatric Technician | 28726 |
| Hardy | Denise | 1912202813 | Licensed Psychiatric Technician | 33714 |
| Holmes | Sherronya | 1205214228 | Licensed Psychiatric Technician | 37605 |
| Kaur | Narinder | 1063006294 | Licensed Psychiatric Technician | 41886 |
| Kottke | Marline | 1891223111 | Licensed Vocational Nurse | 198957 |
| Laizer | Gloria | 1255706479 | Registered Nurse | 764452 |
| Lambert | Rekha | 1164647525 | Licensed Marriage and Family Thera | 103862 |
| Limas | Stephanie | 1053433748 | Licensed Marriage and Family Thera | 99397 |
| Little | Christy | 1497978795 | Licensed Psychiatric Technician | 28731 |
| Lo | Muacong | 1689300857 | Licensed Marriage and Family Thera | 42402 |
| Martin | Kaitlyn | 1548959802 | Licensed Psychiatric Technician | 42399 |
| Mendoza | Michelle | 1477951812 | Registered Nurse | 797022 |
| Michael | Kimberley | 1538831151 | Licensed Psychiatric Technician | 29086 |
| Mocko | James | 1558726224 | Licensed Psychiatric Technician | 38249 |
| Myotte | Wendy | 1265554638 | Licensed Marriage and Family Thera | 84045 |

| Ota | Robert | 1578786554 | Licensed Psychiatric Technician | 33792 | |
|-----------------------------|----------|---|---------------------------------|----------|--|
| Pinano | Paolo | 1245352616 | Licensed Psychiatric Technician | 33726 | |
| Rios | Teri | 1942323829 | Licensed Psychiatric Technician | 29213 | |
| Ruiz | Ronald | 1700907094 | Licensed Psychiatric Technician | 27494 | |
| Sahota | Mandeep | 1609536994 | Registered Nurse | 831415 | |
| Seraypheap | Arunny | 1013037274 | Registered Nurse | 547944 | |
| Sesante | Maria | 1851515720 | Licensed Psychiatric Technician | 30936 | |
| Silver | Hilary | 1720201221 | Physician | C33442 | |
| Sous- | | | | | |
| Figueroa | Sokchear | 1316187362 | Registered Nurse | 95268104 | |
| Tuning | Frankie | 1073631727 | Registered Nurse | 95171895 | |
| Tupper | Charles | 1700944121 | Physician | G185940 | |
| Varquez | Sharon | 1366682387 | Licensed Psychiatric Technician | 34435 | |
| Villasenor | Kendra | 1447518204 | Licensed Psychiatric Technician | 36449 | |
| Winck | Angela | 1083002992 | Registered Nurse | 701021 | |
| Program Name: Restart | | Program Description: Outpatient case management, care coordination | | | |
| Type of Program: MH | | and linkages to housing and employment resources for individuals with | | | |
| Address: 1212 N. California | | SMI, Co-occurring disorders and Justice Involvement. | | | |
| City: Stockton, | CA 95202 | | | | |

| Phone Number: (209) 468- 9373 | | Populations served: Adult | | | | |
|---|--------------|--|--|--------------|--|--|
| <u></u> 스夫 | | Cultural Abilities: Adults with history of and risk of further Justice Involvement | | | | |
| Non-English La | anguages:Spa | Office Hours: Monday - Friday 8:00 am- 5:00 pm | | | | |
| | | website: https:// | website: https://www.sjcbhs.org/index.aspx | | | |
| Last Name | First Name | NPI | Type of License | License # | | |
| | | | Associate Marriage and Family | | | |
| Bautista | Daniel | 1407490733 | Therapist | 112805 | | |
| Brown | Monique | 1962641050 | Licensed Marriage and Family Thera | 46467 | | |
| Castro | Gerardo | 1780123737 | Associate Clinical Social Worker | 117866 | | |
| Joaquin County MH Services Lodi Clinic Intens | | Intensive Care | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Service Based Services (IHBS); Medication Sup | es including | | |
| Type of Program: MH Street, Suites 1, 3, 5, 6, City: Lodi, CA 95240 | | | | | | |

| Phone Number 2070 | r:(209) 331- | Populations served: Adult, Children, and Youth | | |
|-------------------|---------------|---|-----------|--|
| | | Cultural Abilities: Comprehensive mental health 60), children, youth, and their families living in North | • | |
| △Ł | | Services include psychiatric assessment, medication individual therapy, and case management. | · · | |
| Non-English La | anguages: Spa | Office Hours: Monday - Friday, 8:00 am - 5:00 pr | n | |
| | | website: https://www.sjcbhs.org/adult.aspx | | |
| Last Name | First Name | NPI Type of License | License # | |

| Last Name | First Name | NPI | Type of License | License # |
|---------------|-------------|------------|------------------------------------|-----------|
| | | | Associate Marriage and Family | |
| Abdullahi | Krissie | 1407307762 | Therapist | 125000 |
| Alban | Benjamin | 1932227295 | Licensed Clinical Social Worker | 26094 |
| | | | Licensed Marriage and Family | |
| Alcaraz Tapia | Maria Marle | 1942470299 | Therapist | 93646 |
| Allanki | Sailaja | 1306897723 | Physician | 138838 |
| Chavez | April | 1760959670 | Licensed Marriage and Family Thera | 113250 |
| | | | Associate Professional Clinical | |
| Cusumano | Katherine | 1659988822 | Counselor | 8125 |
| Dhillon | Gipanjot | 1013446046 | Physician | A21935 |
| Hill | Patricia | 1902926231 | Licensed Marriage and Family | 23764 |

| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 |
|--|-----------|--------------------------------|--|--------------|
| Kumar | Gaurav | 1235513102 | Physician | A151187 |
| Padilla | Cassandra | 1477137289 | Registered Nurse | 95137004 |
| Phillips | Victoria | 1871110437 | Associate Clinical Social Worker | 92751 |
| Ramires | Azucena | 1316497274 | Associate Marriage and Family | 130891 |
| Ramiscal | Rio | 1851046700 | Licensed Psychiatric Technician | 42121 |
| Rizvi | Saba | 1619190501 | Physician | A95786 |
| | | | Associate Marriage and Family | |
| Romero | Karla | 1083133276 | Therapist | 100573 |
| Saluja | Amandeep | 1588894778 | Physician | C175781 |
| Soares | Ana | 1922191410 | Physician | A68523 |
| Tamayo | Donelle | 1073871216 | Registered Nurse | 551864 |
| Joaquin County MH Intensive Care | | Intensive Care (Intensive Home | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Services (IHBS); Medication Sup | es including |
| Type of Program: MH Street City: Tracy, CA 95376 | | | | |

| 60) living in Soumedication supp | | | es: Comprehensive mental health service uth County area. Services include psychial port, group and individual therapy, and ca | tric assessme |
|----------------------------------|---------------|------------|---|---------------|
| Non-English La | anguages: Spa | | Monday - Friday 8:00 am - 5:00 pm www.sjcbhs.org/adult.aspx | |
| Last Name | First Name | | Type of License | License # |
| Arcega | Christina | 1609219450 | Licensed Marriage and Family Thera | 137032 |
| Dwyer | Danyelle | 1124672266 | Associate Clinical Social Worker | 115736 |
| Everson | Maja | 1811975139 | Physician | 172144 |
| | Jon | | | |
| Gutoman | Christophe | 1578814042 | Licensed Marriage and Family Thera | 130945 |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 |
| Jackson | Sasha | 1295181295 | Licensed Clinical Social Worker | 96641 |
| Keys | Sheryl | 1942664875 | Psychiatric Technician | 38333 |
| Pasa | Angelo | 1689874125 | Registered Nurse | 691250 |
| Stokes | Vicki | 1164061024 | Licensed Clinical Social Worker | 117183 |

Program Name:
Transcultural Clinic
(TCC) - Full range of
specialty mental health
services and intensive case
management program.
#9014

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

Type of Program: MH

Address: 4422 N. Pershing City: Stockton, CA 95207 Phone Number: (209) 953-

8843

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Non-English Languages: Cambodian, Laotian, Hmong, Vietnamese, Thai **Populations served:** Adult Focus on outreach and access for the Southeast Asian populations

Cultural Abilities: Full Service Partnership with emphasis on serving persons from Southeast Asia. Services available in Cambodian (Khme Hmong, Laotian (Lao) and Vietnamese.

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

website: https://www.sjcbhs.org/transcultural_clinic.aspx

| Last Name | First Name | NPI | Type of License | License # |
|--|------------|--|---|--------------|
| Chukwuka | Ogiram | 1063662781 | Licensed Clinical Social Worker | 81785 |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 |
| Nguyen | Quynh-Chi | 1417371014 | Registered Nurse | 845080 |
| Smith | Pamela | 1902889694 | Physician | G84663 |
| | | | Associate Marriage and Family | |
| Thao | Seelina | 1215093653 | Therapist | 130779 |
| | | | Licensed Marriage and Family | |
| Xiong | Maly | 1932218849 | Therapist | 86055 |
| Program Name: Southeast Asian Recovery Services Program D Intensive Ca | | Intensive Care Intensive Home Intervention | ription: Case Management/ Brokerage Coordination (ICC); Mental Health Service Based Services (IHBS); Medication Sup | es including |

Phone Number: (209) 953-8843

Cultural Abilities: Full Service Partnership with emphasis on serving persons from Southeast Asia. Services available in Cambodian (Khme Hmong, Laotian (Lao) and Vietnamese.

Non-English Languages: Cambodian, Laotian, Hmong, Vietnamese, Thai Office Hours: Monday - Friday, 8:00 am - 5:00 pm

website: https://www.sjcbhs.org/transcultural_clinic.aspx

| | | Wobolto: Httpo:// | | |
|-----------|------------|-------------------|-------------------------------|-----------|
| Last Name | First Name | NPI | Type of License | License # |
| Hollowell | Shirley | 1124143474 | Registered Nurse | 352081 |
| Kazmi | Syed | 1437310273 | Physician | A33815 |
| Nguyen | Quynh-Chi | 1417371014 | Registered Nurse | 845080 |
| Smith | Pamela | 1902889694 | Physician | G84663 |
| | | | Associate Marriage and Family | |
| Thao | Seelina | 1215093653 | Therapist | 130779 |
| | | | Licensed Marriage and Family | |
| Xiong | Maly | 1932218849 | Therapist | 86055 |
| | | | | |

CONTRACT ORGANIZATIONAL PROVIDERS

Program Name: ASPIRAnet

#39AR

Type of Program: MH

Address: 6 S. El Dorado

Street, Suite 510

City: Stockton, CA 95202 Phone Number: (209) 478-

9862

<u></u>
<u>A</u>

Non-English Languages:

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

Populations served: Children and Youth

Cultural Abilities: Provides Therapeutic Behavioral Services (TBS) are crisis stabilization services as an alternative to psychiatric hospitalization

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

website: https://www.aspiranet.org

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|----------------------------------|-----------|
| Benitez | Felecia | 1780389015 | Associate Clinical Social Worker | 113910 |
| | | | Associate Professional Clinical | |
| Carpenter | Brandon | 1659148963 | Counselor | 14610 |
| | | | Associate Marriage and Family | |
| Garcia | Isamar | 1093461576 | Therapist | 137674 |

| | | | Associate iviarriage and Family | | |
|---|------------|---------------------------------|--|--|--|
| Juarez | Lucerito | 1417436155 | Therapist | 127517 | |
| | | | Associate Marriage and Family | | |
| Roma Sheen | Cachero | 1962008565 | Therapist | 142415 | |
| Singh | Aneesha | 1649935743 | Associate Clinical Social Worker | 123850 | |
| Pacifica #39AB Coordination (IC | | Coordination (IC Based Services | ription: Case Management Brokerage/In CC); Mental Health Services including Inf (IHBS); Therapeutic Behavioral Service | ensive Home | |
| Phone Number: (805) 981- 1422 Populations se | | | erved: Children and Youth | | |
| 습는 Cultural Abilitie | | | es: Provides outpatient mental health ser | es: Provides outpatient mental health services | |
| Non-English Languages: Office Hours | | | Monday - Friday, 8:00 am - 5:00 pm | | |
| | | | //www.casapacifica.org/ | | |
| Last Name | First Name | NPI | Type of License | License # | |
| OUT OF COUNTY PROVIDER | | ER | | | |

| Program Nam (University of #39A1 | | Program Desc Services | ription: | Mental Health Se | rvices Intensiv | e Home Base |
|---|---------------|--|-----------|---|-----------------|--------------|
| Type of Program: MH | | | | | | |
| Address:405 E | . Pine Street | | | | | |
| City: Stockton, | CA 95204 | | | | | |
| Phone Number 5519 | r: (209) 464- | Populations served: Adult | | | | |
| △よ | | Cultural Abilities: Behavioral Intervention Services | | | | |
| Non-English La | anguages: Sp | Office Hours: Monday - Friday 8:00 am - 5:00 pm | | | | |
| | | website: none | | | | |
| Last Name | First Name | | Type of | License | | License # |
| NON LICENSE | D STAFF ON | LY | | | | |
| | | | | | | |
| Program Name: Charis Youth Center #9057 Type of Program: MH | | Intensive Care | Coordinat | Case Management ion (ICC); Mental ervices (IHBS); M | Health Servic | es including |

lAddress: 714 W. Main Street City: Grass Valley, CA 95945 Phone Number: (530) 477-**Populations served:** Children and Youth 9800 **Cultural Abilities:** Outpatient Mental Health Services 心法 Office Hours: Monday - Friday 8:00 am - 5:00 pm Non-English Languages: website: https://www.charisyouthcenter.org/ First Name NPI **Type of License** License # **Last Name OUT OF COUNTY PROVIDER Program Name: Child Program Description:** Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including **Abuse Prevention** Intensive Home Based Services (IHBS); Crisis Intervention Council #39AS Type of Program: MH Address: 540 N. California City: Stockton, CA 95202 Phone Number: (209) 644-**Populations served:** Children and Youth 5311

| <u>△</u> Ł | | Cultural Abilities: Provides outpatient mental health services utilizing strengthening family approach | | | |
|--|------------|--|-------------------------------------|-----------|--|
| Non-English La | anguages: | | Monday - Friday 8:00 am - 5:00 pm | | |
| | | website: www.r | nochildabuse.org | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Archangel | Ashle | 1801216965 | Associate Marriage and Family Thera | 106324 | |
| Beck | Vienna | 1396390878 | Licensed Marriage and Family Thera | 150502 | |
| Jacka | Karen | 1790908788 | Licensed Clinical Social Worker | 16470 | |
| Looney | Taylere | 1003553223 | Licensed Marriage and Family Thera | 152346 | |
| Lowe | Cassandra | 1205278694 | Licensed Marriage and Family Thera | 118868 | |
| Program Nam Children's Ho Stockton #39 | me of | Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Med Support; Crisis Interven | | | |
| Type of Progra | m: MH | | | | |
| Address: 430 N. Pilgrim Street | | | | | |
| City: Stockton, CA 95205 Phone Number: (209) 466- 0853 | | Populations se | erved: Youth and Adolescent | | |

| △も | | Cultural Abilities: Short Term Residential Therapeutic Program | | | |
|---|------------|--|--|---------------|--|
| Non-English La | anguages: | Office Hours: | | | |
| | | | //chstockton.org/ | | |
| Last Name | First Name | NPI | Type of License | License # | |
| | į. | | Associate Marriage and Family | | |
| Lopez | Stephanie | 1184385908 | Therapist | 138590 | |
| | | | Associate Marriage and Family | | |
| Randolph | Jordyn | 1699462150 | Therapist | 148785 | |
| Reinhardt | Janae | 1689296311 | Licensed Clinical Social Worker | 120751 | |
| Ruggles | James | 2084P0804X | Physician | C35361 | |
| Thomas | Tiffany | 1376232850 | Community Health Worker | NA | |
| Children's Home of Intensive Care | | Intensive Care | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Services (IHBS); Med Support; (| ces including | |
| Address 1227 E Lindsay St City: Stockton, CA 95205 | | | | | |

Phone Number: (209) 466-

0853

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Non-English Languages:

Populations served: Youth and Adolecent

Cultural Abilities: Short Term Residential Therapeutic Program

Office Hours: 24 HOURS

website: https://chstockton.org/

| | | | - | |
|-----------|------------|------------|---------------------------------|-----------|
| Last Name | First Name | NPI | Type of License | License # |
| Lopez | Stephanie | 1184385908 | Associate Marriage and Family | 138590 |
| Randolph | Jordyn | 1699462150 | Associate Marriage and Family | 148785 |
| Reinhardt | Janae | 1689296311 | Licensed Clinical Social Worker | 120751 |
| Ruggles | James | 2084P0804X | Physician | C35361 |
| Thomas | Tiffany | 1376232850 | Community Health Worker | NA |

Program Name:

Community Re-Entry

Program ILS #9044

Type of Program: MH

Address: 405 E. Pine Street

City: Stockton, CA 95204

Phone Number: (209) 464-

5519

Program Description: Case Management/ Brokerage; Mental Healtl

Services; Crisis Intervention

Populations served: Adult

| 스夫 Non-English Languages: Spa | | Cultural Abilities: Provides independent living skills training and rehabilitation services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none | | |
|---|-----------------------------------|--|--|---------------------------|
| Last Name | First Name | NPI | Type of License | License # |
| NON LICENSE | D STAFF ON | ILY | | |
| Program Nam Family Service Type of Progra Address: 525 V Lane City: Lodi, CA 9 | es #39CP m: MH V. Kettleman | Intensive Care (| ription: Case Management/l Coordinatiion (ICC); Mental H Bases Services (IHBS); Cris | lealth Services including |
| Phone Number: (209) 369- 1939 仚ሌ Non-English Languages: | | Populations served: Youth & Adolescent Cultural Abilities: Short Term Residenital Therapeutic Program Office Hours: 24 Hours website: www.ea.org | | |
| Last Name | First Name | NPI | Type of License | License # |

Program Name: EA
Family Services Losh
STRTP #39CN

Type of Program: MH Address: 601 Palm Ave.

City: Lodi, CA 95240

Phone Number: (209) 333-

10971

ΔŁ

Non-English Languages:

Program Description: Case Management/Brokerage inlcuding Intensive Care Coordinatiion (ICC); Mental Health Services including Intensive Home Bases Services (IHBS); Crisis Intervention.

Populations served: Females 6-12

Cultural Abilities: Youth, LGBT, CSEC, Training encompassing multi

ethnicities and cultural backgrounds.

Office Hours: 24 Hours

website: www.ea.org

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|-------------------------------------|-----------|
| Beltezore | Erica | 1053447854 | Licensed Marriage and Family Thera | 96971 |
| Gonzalez | Rosalba | 1548977457 | Associate Clinical Social Worker | 106674 |
| Lukyanov | Inna | 1588073274 | Associate Marriage and Family Thera | 122113 |
| Quintero | Heather | 1275060683 | Licensed Marriage and Family Thera | 132665 |

| Program Name: EA Family Services #39DG | Intensive Care | cription: Case Managemen Coordinatiion (ICC); Mental e Bases Services (IHBS); Cr | Health Services including |
|--|--|--|----------------------------|
| Type of Program: MH | | | |
| Address: 702 Richmond Ro | 1 | | |
| City: Susanville, CA 96130 | | | |
| Phone Number: (209) 333- 0971 | Populations s | served: Youth & Adolescent | |
| △ | Cultural Abilities: Short Term Residenital Therapeutic Program | | |
| Non-English Languages: | Office Hours: 24 Hours | | |
| | website: www. | | |
| Last Name First Name | e NPI | Type of License | License # |
| Program Name: Edgewood Center for Children and Families #39AV | Coordination (| cription: Case Managemen ICC); Mental Health Service s (IHBS); Therapeutic Beha | s including Intensive Home |
| Type of Program: MH | | | |

Address: 1801 Vincente Street - Buildings A, D, H,

L, S, W, P, M

City: San Francisco, CA

94116

Phone Number: (415) 681-

3211

○b

Non-English Languages:

Populations served: Children and Youth

Cultural Abilities: Provides outpatient mental health service

Office Hours: Monday - Friday 8:30 am- 5:00 pm

website: www.edgewood.org

First Name NPI Last Name

Type of License

License #

OUT OF COUNTY PROVIDER

Program Name: Elite Family Systems-Banyan Home #39DC

Type of Program: MH

Address: 1708 Banyan Ct

City: Ceres, CA 95307

Program Description: Case Management/Brokerage inlcuding Intensive Care Coordinatiion (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Crisis Intervention.

| Phone Number 2088 스노 Non-English La | | Populations served: Youth & Adolescent Cultural Abilities: Short Term Residenital Treatment Therapeutic Pro Office Hours: 24 Hours website: www.elitefamily.org | | |
|---|------------|--|--|--------------|
| Last Name | First Name | NPI | Type of License | License # |
| Program Name: Elite Family Systems-Blaker Home #39DE Type of Program: MH | | Intensive Care (| r iption: Case Management/Brokerage in Coordinatiion (ICC); Mental Health Servic Based Services (IHBS); Crisis Intervention | es including |
| Address: 3607 Baker Road City: Ceres, CA 95307 Phone Number: 209-531- 2088 | | • | erved: Youth & Adolescent | |
| <u></u> | | Cultural Abilities: Short Term Residenital Treatment Therapeutic Pro | | |
| Non-English Languages: | | Office Hours: 24 Hours website: www.elitefamily.org | | |
| Last Name | First Name | | | License # |
| | | | | |

Program Name: Elite Family Systems-Leslie Home #39DB

Type of Program: MH Address: 2528 Leslie Ln

City: Ceres, CA 95307

Phone Number: 209-531-

2088 <u></u>ුර්

|Non-English Languages:

Program Description: Case Management/Brokerage inlcuding Intensive Care Coordinatiion (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Crisis Intervention.

Populations served: Youth & Adolescent

Cultural Abilities: Short Term Residenital Treatment Therapeutic Pro

Office Hours: 24 Hours

website: www.elitefamily.org

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|-----|-----------------|-----------|
| | | | | |

Program Name: Elite Family Systems-Scoffield Home #39DD

Type of Program: MH

Address: 3213 Uranus Drive

Program Description: Case Management/Brokerage inlcuding Intensive Care Coordinatiion (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Crisis Intervention.

| 2088 ப் த Non-English Languages: | | Populations served: Youth & Adolescent Cultural Abilities: Short Term Residenital Treatment Therapeutic Pro Office Hours: 24 Hours website: www.elitefamily.org | | |
|--|------------|--|--|---|
| Last Name | First Name | NPI Type of License License # | | |
| Program Name: Turning Point Community Program- Esperanza #39BX Type of Program: MH Address: 1803 W. March City: Stockton, CA 95207 Phone Number: (200) 636 | | Intensive Care (Intensive Home Partnership Pro Treatment) | ription: Case Management/ Brokerage in Coordination (ICC); Mental Health Service Based Services (IHBS); Crisis Intervention gram; Evidence based Model-ACT (Assertation) | es including on. Full-Servic rtive Commur |
| Phone Number: (209) 636- 5353 | | Populations served: Those diagnosed with a severe mental health diagnosis. | | |

| ்க Non-English Languages: | | Cultural Abilities: Veterans, LGBT, Older Adults, Physical Disabilities and Mental Health Diagnosis; Cultural Abilities Training(s) required to each staff and offered regularly. Office Hours: Monday - Friday 8:30 am - 5:00 pm website: www.tpcp.org | | | |
|------------------------------|------------|---|---|-----------|--|
| Last Name | First Name | NPI Type of License Lice | | | |
| Jahangiri | Hameed | 1497707731 | Psychiatry and Neurology | A78392 | |
| Link | Autumn | 1306483276 | Professional Counselor | 11425 | |
| | | | Licensed Marriage and Family | | |
| Moore | Chermayne | 1700396850 | Therapist | 152655 | |
| Moreno | Sheila | 1568026540 | Clinical Social Worker | 109900 | |
| Sorm | En | 1518076249 | Licensed Psychiatric Technician/ Licensed Vocational Nurse Licensed Marriage and Family | 28784/176 | |
| Wright Kathryn 124556 | | 1245566520 | Therapist | 77405 | |
| Finch Youth Center | | Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention | | | |

ILLICI VOLLIUULI Type of Program: MH Address: 3800 Coolidge City: Oakland, CA 94602 Phone Number: (510) 482-Populations served: Children and Youth 2244 **Cultural Abilities:** Provides outpatient mental health services Non-English Languages: Office Hours: Monday - Friday 8:30 am - 5 pm website: www.fredfinch.org First Name NPI **Type of License** License # **Last Name** 41. Fred Finch Youth Center- OUT OF COUNTY PROVIDER **Program Description:** Crisis Residential Treatment Program **Program Name:** G.L.O.M.A.R.F. 3 #39CB Type of Program: MH Address: 1117 S. Grant City: Stockton, CA 95206 Phone Number: (209) 330-Populations served: Adult 7155 x506 Cultural Abilities: Crisis Residential Treatment Program 个点 |Non-English Languages: Office Hours: 24 HOURS

| | website: www.glom-arf.org | | | |
|---|---------------------------------|------------------------|---|-------------|
| Last Name | First Name | NPI | Type of License | License # |
| | | | Associate Marriage and Family | |
| Alexander | Nikeya | 1093284275 | Therapist | 137056 |
| | | | Licensed Marriage and Family | |
| Kaur | Amandeep | 1073041927 | Therapist | 139250 |
| Program Nam G.L.O.M.A.R.F Type of Progra Address: 8210 City: French Ca 95231 | m: MH Bright Road amp, CA | oad | | |
| Phone Number 7155 x508 | r:(209) 330- | Populations se | erved: Adult | |
| ☐ b Cultural Abilities: Adult Transiti | | | es: Adult Transitional Residential Treatm | ent Program |
| Non-English Languages: | | Office Hours: 24 HOURS | | |
| | | website: www.g | lom-arf.org | |
| Last Name | First Name | NPI | Type of License | License # |

| | | | Associate Marriage and Family | |
|--|------------|--|---|--------|
| Alexander | Nikeya | 1093284275 | Therapist | 137056 |
| | | | Licensed Marriage and Family | |
| Kaur | Amandeep | 1073041927 | Therapist | 139250 |
| Program Name: G.L.O.M.A.R.F. 5 #39CC Type of Program: MH Address: 458 Almond Drive City: Lodi, CA 95240 | | Program Desc | ription: Crisis Residential Treatment Pro | gram |
| Phone Number: (209) 330-7155 x597 | | Populations se | erved: Adult | |
| 스ሌ | | Cultural Abilities: Crisis Residential Treatment Program | | |
| Non-English La | anguages: | Office Hours: 24 HOURS | | |
| | | website: www.glom-arf.org | | |
| Last Name | First Name | NPI Type of License License | | |
| | | | Associate Marriage and Family | |
| Alexander | Nikeya | 1093284275 | Therapist | 137056 |

| | | | Licensed Marriage and Family | | |
|---|---------------|---|---|------------|--|
| Kaur | Amandeep | 1073041927 | Therapist | 139250 | |
| Program Nam | e: Mary | Program Desc | ription: Case management, Rehabilitatio | n, Groups, | |
| Magdalene Community | | Individual Therapy, Advocacy and Linkage, other resources as needed | | | |
| Services | | | | | |
| Type of Progra Address: 620 N City: Stockton, | N. Aurora St. | | | | |
| Phone Number 4519 | r:(209) 888- | Populations se | erved: Adults 18- Older Adult | | |
| 仚৬ | | Cultural Abilities: African American, LGBTQ, TAY, Adults, and Older | | | |
| Non-English La | anguages: | Office Hours: Monday-Friday 8:00am - 5:00pm | | | |
| Spanish | | website: https:// | www.marymagdalenecs.com | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Cash | Deonne | 1881469377 | NA | NA | |
| Mendoza | Janet | 1912406976 | Associate Clinical Social Worker | 89346 | |
| Ralph | Tyrone | 1598471146 | NA | NA | |
| Sanders | Denise | 1851166722 | Psychiatric Technician | 32263 | |
| Smith | Tamra | 1336267608 | Licensed Clinical Social Worker | 76975 | |

Program Name: Turning Point Community

Program Justicia #39BY

Type of Program: MH

Address: 1803 W. March

City: Stockton, CA 95207

Phone Number: (209) 636-

5353

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Hmong,

Spanish, Hmong

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; Evidence Based Model-ACT (Assertive Commun Treatment)

Populations served: Those diagnosed with a severe mental health diagnosis.

Cultural Abilities: Veterans, LGBT, Older Adults, Physical Disabilities and Mental Health Diagnosis; Cultural Competency Training(s) require of each staff and offered regularly.

Office Hours: Monday - Friday 8:30 a.m. - 5:00 p.m.

website: www.tpcp.org

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|------------------------------------|-----------|
| Jahangiri | Hameed | 1497707731 | Psychiatry and Neurology | A78392 |
| Link | Autumn | 1306483276 | Professional Counselor | 11425 |
| Moore | Chermayne | 1700396850 | Licensed Marriage and Family Thera | 152655 |
| Moreno | Sheila | 1568026540 | Clinical Social Worker | 109900 |
| | | | Licensed Psychiatric Technician/ | 28784/17 |
| Sorm | En | 1518076249 | Licensed Vocational Nurse | 6829 |

| | | | Licensed Marriage and Family | | |
|---------------------------------|-----------------------------|---|--------------------------------------|---------------|--|
| Wright | Kathryn | 1245566520 | Therapist | 77405 | |
| Program Nam | e: Latino | Program Desc | ription: Case Management/ Brokerage; | Mental Health | |
| Behavioral He | ealth and | Services; Crisis | s Intervention | | |
| Recovery Servery 90671 | Recovery Services #90671 | | | | |
| Type of Progra Address : 237 | | | | | |
| City: Stockton, | CA 95202 | | | | |
| Phone Number 8910 | r: (209) 444- | Populations se | erved: Adult | | |
| ∆ & | | Cultural Abilities: Provides Culturally Competent Services to Latinos | | | |
| Non-English La | anguages: Spa | Office Hours: | Monday - Friday 8:00 am - 5:00 pm | | |
| | | www.elconcilio. | org | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Swanson | Alisha | 1790908242 | Licensed Marriage and Family Thera | 124571 | |
| Program Name: Martin | | Program Description: Case Management/ Brokerage; Mental Health | | | |
| Gipson Socialization | | Services; Crisis | s Intervention | | |
| Center # 9041 | | | | | |

Type of Program: MH Address : 405 E. Pine

City: Stockton, CA 95204 Phone Number: (209) 464-

5519

 \triangle

Non-English Languages:

Populations served: Adult

Cultural Abilities: Provides socialization, vocational, and educational opportunities for Adult Mentally ill beneficiaries.

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

website: none

| Last Name | First Name NPI | Type of License | License # |
|-------------|----------------|-----------------|-----------|
| NON LICENSE | ED STAFF ONLY | | |

Program Name: Parents By Choice #39BL

Type of Program: MH

Suite 300

City: Stockton, CA 95202

Phone Number: (209) 478-

4554 ext. 1040

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

Populations served: Children, Adolescents, and Families

| | | Positive Parenti | es: Therapeutic Foster Care/Mental Healting Classes; Foster Care/Adoptions; Trans | · · |
|--|-----------------------------|------------------|---|------------|
| <u>_</u> | | Program | | |
| Non-English La | • | | Monday - Friday 10:00 am - 6:00 pm | |
| | | - | arentsbychoice.net | |
| Last Name | First Name | NPI | Type of License | License # |
| Andrade | Louisa | 1679941306 | Licensed Marriage and Family Thera | 145133 |
| Crusos | Amanda | 1700418084 | Associate Clinical Social Worker | 94023 |
| Lo | Christopher | 1891463345 | Associate Clinical Social Worker | 86400 |
| Oliviera | Carlos | 1992101612 | Licensed Marriage and Family Thera | 116198 |
| Ramos | Mayra | 1336552553 | Licensed Marriage and Family Thera | 113207 |
| Ruiz Velasco | Johanna | 1548041114 | Associate Clinical Social Worker | 122353 |
| Program Nam Folsom Sacra #39CQ Type of Progra Address: 9951 Suite B City: Sacramer | mento m: MH Horn Road | | ription: Case Management/ Brokerage; Intervention; Medication Support | Mental Hea |

| ○点 Cultura Non-English Languages: Spoffice F | | pulations served: Adult ultural Abilities: Provides outpatient mental health services fice Hours: Monday Friday 7:30 am-6:00 pm ebsite: www.psynergy.org | | |
|--|--------------|---|--------------------|--|
| | Name NPI | Type of License | License # | |
| OUT OF COUNTY P | ROVIDER | | | |
| | | scription: Case Management | /D M (| |
| Sacramento #39CJ | Services; Cr | isis Intervention; Medication Sup | | |
| Type of Program: Mh | 1 | | | |
| Address: 4604A Roos Avenue | sevelt | | | |
| City: Sacramento, CA 95820-4520 | 4 | | | |
| Phone Number:(916) 5876 | · | served: Adult | | |
| △& | Cultural Abi | lities: Provides outpatient ment | al health services | |

| Non-English L | anguages: Spa | Office Hours: | Monday Friday 7:30 am-6:00 pm | | | |
|---------------|---------------|---------------|---------------------------------|-----------|--|--|
| | | website: www. | website: www.psynergy.org | | | |
| Last Name | First Name | NPI | Type of License | License # | | |
| OUT OF COU | INTY PROVID | ER | | | | |
| Abbott | Kristi | 1053574202 | Licensed Clinical Social Worker | 65194 | | |
| Arreola | Yvette | NA | Peer Specialist | NA | | |
| | | | Licensed Marriage and Family | | | |
| Balbi | Miranda | 1891249926 | Therapist | 111807 | | |
| | | | Associate Marriage and Family | | | |
| Clark | Juli | 1376971143 | Therapist | 119980 | | |
| | | | Associate Professional Clinical | | | |
| Cross | Hailey | 1679060396 | Counselor | 10875 | | |
| Effiong | Eunice | 1881254704 | MHRS | NA | | |
| Elliott | James | 1033316732 | MHRS | NA | | |
| | | | Associate Marriage and Family | | | |
| Her | Alyssa | 1148397838 | Therapist | 149802 | | |
| | | | Associate Professional Clinical | | | |
| Jacques | Adrian | 1629541446 | Counselor | 8361 | | |
| Kuglar | Aeric | 1023360757 | MHRS | NA | | |

| | | | Associate Marriage and Family | |
|---|----------|------------|---|---------------|
| Palacio | Alex | 1952123853 | Therapist | 141807 |
| Palma | Efrain | 1770151300 | MHRS | NA |
| Pan | Abram | 1225666928 | Medical Doctor | A99238 |
| Pierre | Jorene | 1467943712 | MHRS | NA |
| Pragasa | Sheryll | 1770101735 | Licensed Vocational Nurse | 708103 |
| Pritchett | | | | |
| Roberts | Carlissa | 1184485781 | MHRS | NA |
| Reddy | Sheela | 1700045424 | Medical Doctor | A106025 |
| Sanders | Laurel | 1235911942 | Licensed Vocational Nurse | 723573 |
| Schwedler | Grace | 1215658117 | Associate Social Worker | 109181 |
| | | | Associate Marriage and Family | |
| Stockland | Rebecca | 1588216550 | Therapist | 115561 |
| Stringer | Samantha | 1215751136 | OQP | NA |
| Valdez | Javier | 1538510292 | MHRS | NA |
| Vue | Anna | 1134759376 | Nurse Practitioner | 95012482 |
| Program Name Psynergy - Sacramento - Clinic B #39CH | | _ | ription: Case Management/ Brokerage; s Intervention; Medication Support | Mental Health |
| Type of Progra | am: IVIH | | | |

Address: 4616 Roosevelt

Avenue

City: Sacramento, CA

Phone Number: (916) 379-

5876

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Populations served: Adult

Cultural Abilities: Provides outpatient mental health services

Office Hours: Monday Friday 7:30 am-6:00 pm

Non-English Languages: Spa

website: www.psynergy.org

| Last Name | First Name | NPI | Type of License | License # |
|------------|------------------------|------------|-------------------------------------|-----------|
| OUT OF COU | OUT OF COUNTY PROVIDER | | | |
| Allen | Coleen | 1518601418 | Associate Social Worker | 122829 |
| Arnett | Melissa | 1215325386 | Associste Marriage and Family Thera | 127309 |
| Asay-Bemis | Laura | 1023853801 | Certified Peer Specialist | NA |
| Bhullar | Annitra | 1639712508 | Associste Marriage and Family Thera | 147057 |
| Dunn | Catherine | 1780366880 | Licensed Vocational Nurse | 734823 |
| Fowler | Ben | 1801156567 | Licensed Clinical Social Worker | 76696 |
| Henderson | Molene | 1508412495 | MHRS | NA |
| Mejorado | Hector | 1336783513 | NA | NA |
| Phenco | Julie | 1154520708 | Medical Doctor | A124058 |

| Rikala | Alan | 1326592395 | MHRS | NA | |
|--|--------------|---|---|---------------|--|
| Toloy | Lydia | 1568927234 | MHRS | NA | |
| Program Nam Greenfield Pr | • | | ription: Case Management/ Brokerage; s Intervention; Medication Support | Mental Health | |
| #39CZ Type of Program: MH Address: 215 Huerta City: Greenfield, CA 93927 | | | | | |
| Phone Number: 408-465-8280 | | Populations served: Adult Cultural Abilities: Provides outpatient mental health services | | | |
| △も Non-English I | anguages: Sp | Office Hours: Monday Friday 7:30 am-6:00 pm | | | |
| Tron English E | angaagoo. op | website: www.psynergy.org | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| OUT OF COU | INTY PROVID | ER | | | |
| Aquino | MaCindy | 1043684095 | Licensed Vocational Nurse | 291024 | |
| De La Cruz | Noah | 1497424733 | Associate Social Worker | 103458 | |
| Leigh- | | | | | |

| Morales | Melissa | 1669129664 | MHRS | NA | |
|---------------------------------|---|-------------------------|---|---------------|--|
| Nunez | Andrea | 1235918038 | Peer Support | NA | |
| Sanchez | Samantha | NA | Peer Support | NA | |
| Uribe | Bianca | 1386213981 | MHRS | NA | |
| Villalobos- | | | Associate Marriage and Family | | |
| Campbell | Angela | 1992394357 | Therapist | 144243 | |
| | | | Associate Professional Clinical | | |
| Vradenburg | Amalia | 1467298554 | Counselor | 16940 | |
| Program Nam | e: Psynergy | Program Desc | ription: Case Management/ Brokerage; | Mental Health | |
| Morgan hill Pr #39CY | ovider - | Services; Crisis | s Intervention; Medication Support | | |
| Type of Progra Address: 1821 | m: MH 7 Hale | | | | |
| City: Morgan H | ill, CA 95037 | | | | |
| Phone Number | Phone Number: 408-465- | | Populations served: Adult | | |
| 8280 | | | | | |
| △も | | Cultural Abiliti | es: Provides outpatient mental health ser | rvices | |
| Non-English La | Non-English Languages: St Office Hours: Monday Friday 7:30 am-6:00 pm | | | | |
| | | website: www. | psynergy.org | | |

| Last Name | First Name | INPI | Type of License | License # |
|------------|-------------|------------|---|-----------|
| OUT OF COU | INTY PROVID | ER | | |
| Barbaran | Alexander | 1063191476 | MHRS | NA |
| | | | Licensed Marriage and Family | |
| Briggs | Heather | 1447643168 | Therapist | 82437 |
| Chiu | Chin | 1013723428 | Licensed Vocational Nurse Associate Professional Clinical | 746158 |
| Downs | Courtney | 1316778293 | Counselor | 16563 |
| Garcia | Yvonne | 1659787604 | MHRS | NA |
| Garibay | Jacqueline | 1588128425 | MHRS | NA |
| Herbert | Tom | 1386378107 | MHRS | NA |
| | | | Associate Professional Clinical | |
| Kent | Sharon | 1518445501 | Counselor | 15905 |
| King | Christopher | 1477252765 | Associate Social Worker | 113335 |
| Lilly | Matthew | 1346571643 | Medical Doctor | A127216 |
| Ramos | Eileen | 1568092914 | MHRS | NA |
| Scheibley | Dawn | 1265588545 | Licensed Marriage and Family Therapist | 39331 |

Program Name: San
Joaquin Connect III FSP

#39CO

Type of Program: MH

Address: 4545 Georgetown

Place, Suite D & E28

City: Stockton, CA 95207

Phone Number: (209) 269-

5587

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Non-English Languages: Spanish, Cambodian

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 Abilities: Full Services Partnership (FSP) model where staff create a supportive environment with services that are based on needs hopes, and dreams of adults with serious mental illness for those discharged from acute care facilities.

Office Hours: Monday - Friday 8:30 am- 5 pm

website: www.telecarecorp.com

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|--------------------|-----------|
| Aguilar | Shelly | 1952969008 | Nurse Practitioner | 22945 |

| Dominguez | Kristen | 1205663895 | Vocational Nurse | 721186 | |
|--|---------------------------------|--|---|--------------|--|
| Hayes | Morackot | 1255153169 | Registered Nurse | 806387 | |
| Lorenz | Arthur | 1477603249 | Licensed Marriage and Family Thera | 45350 | |
| Williams | Tyresha | 1588160865 | Associate Clinical Social Worker | 118678 | |
| Summitview (Treatment Ce Type of Progra Address: 670 F City: Placerville | Summitview Child Intensive Care | | ription: Case Management/ Brokerage Coordination (ICC); Mental Health Service Based Services (IHSB); Medication Sup | es including | |
| Phone Numbe 2412 | r: (530) 644- | Populations served: Children and Youth | | | |
| △よ | | Cultural Abilities: Provides outpatient mental health services | | | |
| Non-English La | Non-English Languages: | | Office Hours: Monday - Friday 8 am- 5 pm | | |
| | | | ummitviewtreatment.org | | |
| Last Name | First Name | NPI | Type of License | License # | |
| OUT OF COU | OUT OF COUNTY PROVIDER | | | | |
| | | | | | |

Program Name: Telecare (aka Jeremy House) #39AX

Type of Program: MH

Address: 5634 Jeremy Way City: Stockton, CA 95212

Phone Number: (209) 888-

4969

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Non-English Languages:

Program Description: Crisis Residential Treatment Program

Populations served: Adult

Cultural Abilities: Crisis Residential Treatment Program

Office Hours: 24 HOURS

website: www.telecarecorp.com

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|------------------------------------|-----------|
| Huynh | Thuy | 1033485495 | Licensed Psychiatric Technician | 36454 |
| Reiland | Jessica | 1003154634 | Associate Clinical Social Worker | 70377 |
| Taylor | Shannan | 1528074770 | Licensed Marriage and Family Thera | 46081 |

Program Name: Telecare Early Intervention Recovery Services (TEIRS) #39B2

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

Type of Program: MH

Address: 4545 Georgetown

Place, Suite A3

City: Stockton, CA 95207

Phone Number: (209) 715-

3754

Non-English Languages: Spaand adults

Populations served: Adults

Cultural Abilities: Provides outpatient mental health services for child

Office Hours: Monday - Friday 8 am- 5 pm

website: www.telecarecorp.com

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|--------------------|-----------|
| Aguilar | Shelly | 1093239436 | Nurse Practitioner | 22945 |

| #39BZ Intensive | | | Coordination (ICC); Mental Health Serve Based Services (IHBS); Medication Services | |
|-----------------|---------------|---|--|----------|
| • | ame: Telecare | Program Description: Case Management/ Brokerage including | | |
| Russell | David | 1477167666 | Nurse Practitioner | 95039943 |
| Roberts | Tanya | 1912042375 | Licensed Clinical Social Worker | 20414 |
| Palaca | Anthony | 1144971060 | Associate Clinical Social Worker | 91385 |
| Nelson | Tonya | 1932483385 | Licensed Psychiatric Technician | 26756 |
| Flores | Destiny | 1306659263 | Licensed Vocational Nurse | 734315 |
| Costello | Courtney | 1639843659 | Therapist | 144592 |
| | | | Associate Marriage and Family | |
| Moore | Tiffany | 1720707193 | Therapist | 132956 |
| Alonzo | | | Associate Marriage and Family | |

Address: 4545 Georgetown

Place, Suite D & E28

City: Stockton, CA 95207

| Phone Number: (209) 269- 5587 Populations se | | Populations se | erved: Adult | | |
|---|------------|--|------------------------------------|-----------|--|
| △Ł | | Cultural Abilities: Full Services Partnership (FSP) model where staff create a supportive environment with services that are based on needs hopes, and dreams of adults with serious mental illness. | | | |
| Non-English Languages: | | Office Hours: Monday - Friday 8:30 am- 5 pm website: www.telecarecorp.com | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Dominguez | Kristen | 1205663895 | Vocational Nurse | 721186 | |
| Hayes | Morackot | 1255153169 | Registered Nurse | 806387 | |
| Lorenz | Arthur | 1477603249 | Licensed Marriage and Family Thera | 45350 | |
| Monroy | Aldo | 1700354719 | Associate Clinical Social Worker | 104609 | |
| Russell | David | 1477167666 | Nurse Practitioner | 95015254 | |
| | | | Associate Professional Clinical | | |
| Van Ness | JohnMark | 1679237861 | Counselor | 13809 | |

| Program Nam San Joaquin (#39CA | | Intensive Care | ription: Case Managemer Coordination (ICC); Menta Based Services (IHBS); N | Il Health Services including |
|---------------------------------------|---------------|-------------------------|--|----------------------------------|
| Type of Progra | m: MH | | | |
| Address: 4545 Place, Suite D | • | | | |
| City: Stockton, | CA 95207 | | | |
| Phone Number 5587 | r: (209) 269- | Populations se | erved: Adult | |
| | | Cultural Abiliti | es: Full Services Partnersh | nip (FSP) model where staff |
| | | | | ices that are based on needs |
| | | ' ' | | mental illness and who are |
| <u>∆</u> Ł. | | | | vith, the criminal justice syste |
| _ | anguages: Spa | | Monday - Friday 8:30 am - | 5:00 pm |
| Cambodian | | | elecarecorp.com | |
| Last Name | First Name | | Type of License | License # |
| Dominguez | Kristen | 1205663895 | Vocational Nurse | 721186 |

| Hayes | Morackot | 1255153169 | Registered Nurse | 806387 |
|--|------------------------|--|--|---|
| Lorenz | Arthur | 1477603249 | Licensed Marriage and Family Thera | 45350 |
| Monroy | Aldo | 1700354719 | Associate Clinical Social Worker | 104609 |
| Russell | David | 1477167666 | Nurse Practitioner | 95015254 |
| Van Ness | JohnMark | 1679237861 | Associate Professional Clinical Couns | 13809 |
| Program Nam Point Commu Program - Sag #39DN | nity | Psychosocial ar Crisis Interventi Assistance with Vocational/Voca | ription: Transitional Adult Residential Trend therapeutic groups, Individual and Groups, Onsite and Offsite Activities, Client Adult Residential Trends, Onsite and Offsite Activities, Client Adult Residential Counseling, Support Systems ational Counseling, Substance Use Reconsistency planning, 24/7 staff support, and | up Counseling Ivocacy, s, Pre- very Treatmer |
| Type of Progra Address:7224 S Road City: French Ca 95231 | S. Recovery amp, CA | | | |
| Phone Number 6595 | r: (209) 888- | Populations se | erved: Adults 18+ | |

| △も | | Cultural Abiliti | es: | |
|--|---------------|--|--|---|
| Non-English | Languages: Sp | Office Hours: | Monday - Friday 8:00 am - 4:30 pm | |
| | | website: https:// | www.tcp.org/program/sage-village/ | |
| Abbasi | Kafia | 1215114897 | Physician | A113195 |
| Fuller | Kenya | 1063256139 | Licensed Psychiatric Technician | 40338 |
| Mbithi | Ruth | 1740042233 | Licensed Psychiatric Technician | 37510 |
| | | | Associate Professional Clinical | |
| Payton | Geoffrey | 1942899521 | Counselor | 11270 |
| 6 111 | | | C I.C. TCTD C | |
| Spiller | Janelle | NA | Certified SUD Counselor | NA |
| Stevens | Staci | 1750143590 | Licensed Psychiatric Technician | 27672 |
| Program Name: Turning Point Community Program - Sage Village II #39DP Assistance w Vocational/V | | Psychosocial ar Crisis Intervention Assistance with Vocational/Vocational | ription: Transitional Adult Residential Trend therapeutic groups, Individual and Groups, Onsite and Offsite Activities, Client Adult Residential Trends on, Onsite and Offsite Activities, Client Adult Residential Community Support Systems ational Counseling, Substance Use Recovers of Start Support, and Start Support Suppo | up Counselino Ivocacy, s, Pre- very Treatmer |
| Type of Prog | gram: MH | | | |

| Address:7236 Road City: French C | • | | | |
|--|---------------|--------------------------------|-----------------------------------|---------|
| Phone Number: (209) 888- 6595 | | Populations served: Adults 18+ | | |
| △も | | Cultural Abilities: | | |
| Non-English La | anguages: Spa | Office Hours: | Monday - Friday 8:00 am - 4:30 pm | |
| | | website: https:// | www.tcp.org/program/sage-village/ | |
| Abbasi | Kafia | 1215114897 | Physician | A113195 |
| | | | Associate Professional Clinical | |
| Alvarez | Timothy | 1184281719 | Counselor | 14835 |
| Ceja | Isabel | 1881170074 | Licensed Vocational Nurse | 735997 |
| Contreras | Irene | 1174260921 | Licensed Vocational Nurse | 724129 |
| | | | Associate Professional Clinical | |
| Franklin | Alyssa | 1548756430 | Counselor | 11543 |
| Spiller | Janelle | NA | Certified SUD Counselor | NA |

Program Name: Valley Community Counseling Services (VCCS) (Manteca) #9040

Type of Program: MH Address:129 E. Center

Street, Suite 3

City: Manteca, CA 95336

Phone Number: (209) 239-

5553

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Non-English Languages:

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

Populations served: Children and Youth

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

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

website: https://www.valleycommunitycounselingservices.org

| Last Name | First Name | NPI | Type of License | License # |
|------------------|------------|------------|------------------------------------|-----------|
| Amancio | Isabel | 1194868695 | Licensed Marriage and Family Thera | 39580 |

| | | | Associate Marriage and Family | |
|--|--|------------|--|---------------|
| Garcia | Odalis | 1669169561 | Therapist | 141967 |
| | | | | |
| Hira Brar | Shabneet | 1851598452 | Physician | A112447 |
| Kamran | Muhamma | 1811051337 | Physician | C53847 |
| Martin | Brittney | 1366130635 | Associate Marriage and Family Thera | 152389 |
| Navarro | Jessica | 1083344790 | Associate Marriage and Family Thera | 133988 |
| Pena | Adriana | 1295253797 | Associate Clinical Social Worker | 103567 |
| Viles-Reed | Teresa | 1386762623 | Psychologist | 14848 |
| Community (Services (VC Based Progra | Community Counseling development/asset Bervices (VCCS) (School Brokerage including | | ription: Individual/family/group/plan ssessment/collateral /rehab/Case Manage ding Intensive Care Coordination (ICC); ing Intensive Home Based Services (IHBS Intervention | Mental Health |
| Type of Progra | am: MH | | | |
| Address: 6707 Embarcadero City: Stockton | Drive, Suite A | | | |

| Phone Number: (209) 956- 4240 | | Populations served: Children and Youth | | | |
|---|------------------------|---|--|-------------|--|
| <u></u> 스뇽 | | Cultural Abilities: Outpatient mental health services provided at vario schools in Stockton, Manteca and Lodi. | | | |
| Non-English La | Non-English Languages: | | Office Hours: Monday - Friday 8:00 am - 5:00 pm | | |
| Last Name | First Name | | www.valleycommunitycounselingservices Type of License | License # | |
| Last Ivallie | First Name | | Associate Marriage and Family | Licerise ii | |
| Pena | Adriana | 1295253797 | , | 97389 | |
| Viles-Reed | Teresa | 1386762623 | Psychologist | 14848 | |
| Program Name: Valley Community Counseling Services (VCCS) (Tracy) #9041 Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Intervention | | ces including | | | |
| Type of Program: MH | | | | | |
| Address: 19 Ea | ast 6th Street | | | | |
| City: Tracy, CA | N 95378 | | | | |

| guages: | children and yo Office Hours: I | es: Full range specialty mental health seruth in South County area. Monday - Friday 8:00 am - 5:00 pm www.valleycommunitycounselingservices | |
|--|--|---|--|
| | website: https:// | | S.org |
| | • | www.valleycommunitycounselingservices | s.org |
| irst Name | | Tune of Licenses | |
| | INCI | Type of License | License # |
| sahal | | Licensed Marriage and Family | |
| Isabei | 1194868695 | Therapist | 39580 |
| | | Licensed Marriage and Family | |
| osemary | 1407299738 | Therapist | 127214 |
| habneet | 1851598452 | Physician | A112447 |
| /luhammad | 1811051337 | Physician | C53847 |
| lehma | 1073061784 | Associate Clinical Social Worker | 103567 |
| eresa | 1386762623 | Psychologist | 14848 |
| Program Name: Victor Community Services and Support, Stockton, | | Coordination (ICC); Mental Health Service | ces including |
| \(\frac{1}{4}\) | nabneet luhammadehma eresa Victor vices and on, | 1194868695 osemary 1407299738 nabneet 1851598452 luhammad 1811051337 ehma 1073061784 eresa 1386762623 Victor vices and Intensive Care Intensive Home Intervention | Licensed Marriage and Family Therapist 1407299738 Therapist 1851598452 Physician 1073061784 Associate Clinical Social Worker 1386762623 Psychologist Victor Vict |

Address: 2495 W. March

Lane, Suite 125

City: Stockton, CA 95207

Phone Number: (209) 465-

1080

心气

Populations served: Children and Youth

Cultural Abilities: Provides outpatient mental health services in-home

and in community

Non-English Languages: Office Hours: Monday - Friday 8:00 am - 5:00 pm

website: www.victor.org

| wobsite. www.vioter.org | | | notoriorg | |
|-------------------------|-------------|------------|-------------------------------------|-----------|
| Last Name | First Name | NPI | Type of License | License # |
| Abdullahi | Krissie | 1407307762 | Associate Marriage and Family Thera | 125000 |
| Allen | Laterra | 1285290346 | Associate Clinical Social Worker | 118662 |
| | | | Associate Professional Clinical | |
| Bhangu | Simran | 1740765338 | Counselor | 12381 |
| | | | Associate Marriage and Family | |
| Binder | Tiya | 1457071581 | Therapist | 146517 |
| | | | | |
| Chang | Christine | 1669632451 | Physician | A117416 |
| Chee | Christopher | 1447480173 | Physician | 20A12207 |

| | | | Associate Professional Clinical | |
|--------------|----------|------------|------------------------------------|----------|
| Chen | Jiaxen | 1134925175 | Counselor | 17377 |
| | | | Associate Marriage and Family | |
| Cortina | Jonathan | 173087492 | Therapist | 149250 |
| Dadkhah | Betia | 1083709380 | Licensed Marriage and Family Thera | 44160 |
| Davis | Taylor | 1831812395 | Associate Clinical Social Worker | 120594 |
| Dilsilvestro | Grace | 1023848736 | Associate Clinical Social Worker | 124533 |
| Farias | Angela | 1013457878 | Associate Clinical Social Worker | 107024 |
| Kooger | Giana | 1720318132 | Licensed Marriage and Family Thera | 86206 |
| Langham | Kathryn | 1598925901 | Physician | 112928 |
| Mitchell | Gladys | 1861943201 | Associate Clinical Social Worker | 120076 |
| | | | | D70DC9B6 |
| Nijjar | Jasmeen | 1093526659 | Certified Wellness Coach | 18 |
| | | | Licensed Professional Clinical | |
| Pandey | Mia | 1437563384 | Counselor | 15492 |
| | | | Licensed Professional Clinical | |
| Rodriguez | Maria | 1003123241 | Counselor | 16624 |

Program Name: Victor Community Support Services - Manteca #39CG

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

Type of Program: MH

Address:302 Cherry Lane,

Suite 101 & 201

City: Manteca, CA 95337

Phone Number: (209) 647-

6200

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Non-English Languages:

Populations served: Children and Youth

Cultural Abilities: Provides outpatient mental health services in-home and in community.

Office Hours: Monday - Friday 8:30 am - 5:00 pm

website: www.victor.org

| | First Name | | Type of License | License # |
|------|------------|------------|------------------------------|-----------|
| Chee | Christophe | 1447480173 | Psychiatrist | 12207 |
| | Cl II | | Licensed Marriage and Family | |
| Diaz | Claudia | 1275810442 | Therapist | 99791 |

| | l | | Associate iviarriage and Family | |
|-----------|-----------|------------|------------------------------------|--------|
| Ifeanyi | Jimmy | 1679189724 | Therapist | 132326 |
| Langham | Kathryn | 1598925901 | Psychiatrist | 112928 |
| Lopez | Mike | 1356813182 | Associate Clinical Social Worker | 100731 |
| Martinez | Kiara | 1669955407 | Associate Clinical Social Worker | 118299 |
| McNichols | April | 1184361693 | Associate Clinical Social Worker | 117453 |
| Olaguez | Jasmine | 1679057368 | Licensed Marriage and Family Thera | 146988 |
| Ramos | Alisia | 1508418666 | Associate Clinical Social Worker | 90719 |
| Seefeldt | Jacquelyn | 1124250204 | Licensed Marriage and Family Thera | 115647 |
| | | | Associate Professional Clinical | |
| Segale | Kayla | 1114614559 | Counselor | 15348 |
| Simpson | Michelle | 1780214478 | Associate Clinical Social Worker | 92259 |

Contract Psychiatric Hospitals

| BHC H | eritage | Oaks |
|--------|---------|------|
| Hospit | al | |

Program Description: Children's & Adult General & Specialized Mer Health Services. Inpatient Hospital.

Type of Program: MH Address: 4250 Auburn

Boulevard

City: Sacramento, CA

| Phone Number (916) 489- 3336 | Populations served: All Ages |
|---|--|
| <u></u> 스৬ | Cultural Abilities: Interpreter Services available for language other the English |
| Non-English Languages: | Office Hours: 24 HOURS website: www.heritageoakshospital.com |
| Last Name First Name | |
| Out of County Hospital | |
| Program Name: BHC Sierra Vista Hospital Type of Program: MH Address: 8001 Bruceville Road City: Sacramento, CA 95823 | Program Description: Children's & Adult General & Specialized Men Health Services. Inpatient Hospital. |
| Phone Number: (916) 423- 2000 | Populations served: All Ages |
| <u></u> 스뇽 | Cultural Abilities: Interpreter Services available for language other th English |

| INT | | | | | | |
|------------------------|----------------|--------------------------------------|-----------------------------|-----------|--|--|
| Non-English Languages: | | Office Hours: 24 HOURS | | | | |
| | | website: www.sierravistahospital.com | | | | |
| Last Name F | irst Name | NPI | Type of License | License # | | |
| Out of County | Hospital | | | | | |
| St. Helena Hosp | oital | Program Descr | ription: Inpatient Hospital | | | |
| Center for Beha | avioral | | | | | |
| Health | | | | | | |
| Type of Program | of Program: MH | | | | | |
| Address: 525 Or | • | | | | | |
| City: Vallejo, CA | 94590 | | | | | |
| Phone Number: 2200 | (707) 648- | Populations se | erved: All Ages | | | |
| <u>ე</u> ხ | | Cultural Abilities: | | | | |
| Non-English Languages: | | Office Hours: 24 HOURS | | | | |
| | | website: www.a | dventisthealth.org | | | |
| Last Name F | irst Name | NPI | Type of License | License # | | |
| Out of County | Hospital | | | | | |

| Program Name: John Muir Behavioral Health Center | Program Descr | r iption: Inpatient Hos _l | oital | |
|---|---|---|---------------------|---------------|
| Type of Program: MH | | | | |
| Address: 2740 Grant Street City: Concord, CA 94520 Phone Number: (925) 680- 6500 습능 Non-English Languages: | Populations se Cultural Abilitie Office Hours: 2 website: www.jc | es: | | |
| Last Name First Name | NPI | Type of License | | License # |
| Out of County Hospital | | | | |
| Program Name: Sutter Center for Psychiatry Type of Program: MH Address: 7700 Folsom Boulevard | • | r iption: Children's & <i>A</i> . Inpatient Hospital. | Adult General & Spe | ecialized Men |

| City: Sacramer 95826 | nto, CA | | | | |
|-----------------------------|-----------------------------|--------------------------------------|---|-----------|--|
| Phone Number 3045 | r: (916) 388- | Populations served: All Ages | | | |
| 스& | Ġ. | | Cultural Abilities: Interpreter Services available for language other th English | | |
| Non-English La | anguages: | Office Hours: 24 HOURS | | | |
| | | website: www.suttermedicalcenter.org | | | |
| | | NPI Type of License License # | | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Last Name Out of Count | | NPI | Type of License | License # | |
| | y Hospital | Program Desci | Type of License ription: Children's & Adult General & Species. Inpatient Hospital. | | |
| Out of Count Program Nam | y Hospital e: Fremont m: MH | Program Desci | ription: Children's & Adult General & Spe | | |

Phone Number: (510)796-

1100

Populations served: All Ages

△よ

Cultural Abilities:

Non-English Languages:

Office Hours: 24 HOURS

website: www.fremonthospital.com

| | | | | • |
|--------------|------------|------------|-----------------|-----------|
| Last Name | First Name | NPI | Type of License | License # |
| Aneja | Alka | 1619031317 | Physician | A112029 |
| Athwal | Harmohinde | 1740298256 | Physician | A81841 |
| Boora | Kamaljeet | 1356587711 | Physician | 102846 |
| Duvvuri | Vikas | 1255470480 | Physician | A99706 |
| Fooks | Trevor | 1730267535 | Physician | G63964 |
| Harleen | Dyal | 1225424327 | Physician | A153255 |
| Kahlon | Ravinder | 1386741320 | Physician | A50823 |
| Kahlon | Vasdeep | 1497852446 | Physician | A51243 |
| Kaur Waraich | Jaap | 1316132285 | Physician | G67904 |
| Kudaravalli | Padmavathi | 1144221953 | Physician | A67964 |
| Kumar | Pradeep | 1023188935 | Physician | A52032 |
| Kumar | Deepak | 1306257910 | Physician | A130068 |

| Manjunath | Sudha | 1801826797 | Physician | A87131 |
|-----------|-----------|------------|-----------|---------|
| Munir | Syed | 1790718815 | Physician | C55029 |
| Nayak | Nanda | 1477656262 | Physician | A43182 |
| Patel | Falguni | 1548414337 | Physician | A105594 |
| Phillips | Nicholas | 1255727293 | Physician | A153125 |
| Punia | Surender | 1376589663 | Physician | A77004 |
| Reddy | Divya | 1518120211 | Physician | A103547 |
| Singh | Devindar | 1447294624 | Physician | A48148 |
| Singh | Sunpreet | 1326464462 | Physician | A132932 |
| Waraich | Bhupinder | 1689869547 | Physician | A53968 |

SUBSTANCE USE DISORDER SERVICES PROVIDER DIRECTORY

Dependency Counseling Center (CDCC)

Program Name: Chemical | Program Description: Education & Early Intervention Outpatient Treatment Perinatal Component Intensive Outpatient Youth Services

Type of Program: **SUD**

Address: 620 N. Aurora St.

Suite 1

City: Stockton, CA 95202

| Phone Number 3720 | r: (209) 468- | Populations se | erved: Adult and Youth, Adult Perinatal | | |
|-------------------|---------------|--|---|----------------|--|
| <u>△</u> 失 | | | es: Transitional Age Youth, Adolescents, ual, Transgender | Veteran, | |
| | anguages: Spa | Office Hours: Monday, Wednesday and Friday 8:00 am - 5:00 pm; Tuesday and Thursday 8:00 am to 7:00 pm | | | |
| | | website: https:// | /www.sjcbhs.org/GettingHelp.aspx | | |
| Last Name | First Name | NPI | Type of License | License # | |
| Galiza | Marie | 1326742495 | SAC I | 11857 | |
| Hicks | James | 1649920497 | SAC II | Ci3937072 3 | |
| Jackson | Selena | 1386810208 | SAC II | 6675 | |
| Lewandowski | Carla | 1659078137 | SAC I | 14329 | |
| Martin | Rebecca | 1447671581 | SAC II - CCAPP | Aii530503 | |
| Nguyen | Xuan | 1609159623 | SAC II | 169310 | |
| Pelletier | Paul | 1578976569 | Program Manager - CCAPP | Aii537003 | |
| | | | | R0609061 | |
| Roberts | Edelisa | 1043331671 | SAC II | 544 | |

| Sosa | Rebecca | 1770133290 | SACI | 9622 |
|----------------------------------|--------------|--|----------------------------|-----------|
| | | | | |
| Sumano | Jennie | 1972240794 | SAC I | 13307 |
| Vasquez-Gran | Cory | 1720539158 | Program Supervisor - SUDCC | 7222 |
| Program Name: Family | | Program Description: Inpatient Treatment Perinatal Component | | |
| Ties | | Assessments | | |
| Type of Program: SUD | | | | |
| Address: 7178 S Recovery | | | | |
| Rd | | | | |
| City: French Camp, CA | | | | |
| 95231 | | | | |
| Phone Number: (209) 468- 6208 | | Populations served: Adult and Adult Perinatal | | |
| | | Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexu | | |
| △よ | | Transgender | | |
| Non-English La | anguages: Sp | Office Hours: 2 | 24 HOURS | |
| | | website: https://www.sjcbhs.org/GettingHelp.aspx | | |
| Last Name | First Name | NPI | Type of License | License # |
| Cheatham | Lavern | 1427576545 | SAC I | NA |
| Cunningham | Robin | 1154951242 | Certifician | 10568 |

| Eriksen | Brittani | 1518408160 | Certification | 12012 |
|--|---------------|--------------|---|-----------|
| Garcia Maldo | Evelyn | 1962183426 | NA | NA |
| Gomez | Rosemary | 1699898676 | SAC II | C1748121 |
| Graff | Robert | 1366560112 | Physician | G707479 |
| Hamilton | Latressa | 1336821156 | NA | NA |
| Perez | Elizabeth | 1164802277 | SAC I | NA |
| | | | | CADC I |
| | | | | CI3294052 |
| Rimmer | Jo | 1316617541 | SAC II | 1 |
| Russell | Stacy | 1639622566 | Certification | 6991 |
| Satake | Irene | 1578151817 | Registration | 11463 |
| Williams | Joseph | 1326800673 | SAW | NA |
| Program Nam House | e: Recovery | Program Desc | ription: Inpatient Treatment Assessment | S |
| Type of Progra | m: SUD | | | |
| Address: 7233 S Delivery Rd City: French Camp, Ca 95231 | | | | |
| | | | | |

Phone Number: (209)468-

6857

Populations served: Adult

Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexu

Transgender

Non-English Languages:

Spoffice Hours: 24 HOURS

website: https://www.sjcbhs.org/GettingHelp.aspx

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|--------------------------------|-----------|
| Berdahl | Michelle | 1407070331 | Program Manager, CADTP | 7937 |
| | | | | Ci3660102 |
| Boyd | Richard | 1407467400 | SAC II, CCAPP | 2 |
| Charles | Moises | 1982389649 | SAW, CADTP | 15776 |
| | | | | R1578370 |
| DeVries | Derek | 1467277855 | CCAPP | 924 |
| Graff | Robert | 1366560112 | Physician | G707479 |
| Graves | Dawn | 1629625348 | Program Supervisor, CCAPP | RH000502 |
| Hall | Marc | 1235648593 | SAC I, CADTP | 11991 |
| Harton | Antwan | 1346721701 | SAC I, CADTP | 11987 |
| Hedrick | Kathrine | 1043699333 | RN, Ca. State Board of Nursing | 683243 |
| Latorraca | Michael | 1205305968 | SAC II, CCAPP | Ci3408102 |

| Peterson | Martin | 1073098307 | SAC II, CADTP | 9855 | |
|-----------------------------|-----------------------------|---|---|----------|--|
| | | | | LCSW7693 | |
| Rambo | Chelsea | 19526830 | Clinician III | 5 | |
| Ramirez | George | 1215586607 | SAW | 11985 | |
| Rodriguez | Yvonne | 1295564474 | CADTP SUDRC | 17202 | |
| Scott | William | 1710639398 | SAC II, CADTP | 15667 | |
| Vaccarezza | Lisa | 1679715767 | SAC II, CADTP | 8312 | |
| Valenzuela | Augustine | 1831809383 | SAW, CADTP | 14078 | |
| Vaughn | Ginger | 1619444700 | SAC II, CADTP | 8715 | |
| | | | | R1569370 | |
| Wulsin | Patrick | 1154150407 | CCAPP RADT I | 724 | |
| Young | Michael | 1659778629 | Program Supervisor | 175499 | |
| Program Nam | e: Redwood | Program Description: Residential Substance Use Disorder services | | | |
| Family Treatn | nent Center | including: Intake, assessments, treatment planning, individual and ground | | | |
| | | • | ateral, case management, crisis intervent | · • | |
| Type of Progra | Type of Program: SUD | | education, safeguarding medication and transportation and discharge | | |
| Type of Program. 300 | | services. Individual and family therapy, rehabilitation. Education on | | | |
| Address: 440.0 | Caracia Ave | benefits of MAT | and referral to treatment as necessary. | | |
| Address: 416 (| Jorson Ave | | | | |

City: Modesto, CA 95350-

5408

Phone Number: (209) 521-

1805

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Populations served: Women 18 & older; Girls 0-12 years and Boys 0

Cultural Abilities: Women's Needs

Non-English Languages: Office Hours: 24 hours a day / 7 days a week

website: www.redwoodfamilycenter.org

| | | , | | | |
|-----------|------------|---|------------------------------------|-----------|--|
| Last Name | First Name | NPI | Type of License | License # | |
| | | | | Ci4010092 | |
| Amador | Delia | 1417455775 | CCAPP Certified | 3 | |
| Berkowitz | Steve | 1205955671 | Licensed Marriage and Family Thera | 77643 | |
| | | | | R1288220 | |
| Carvaeo | Felicia | 1659870368 | RADT I | 118 | |
| | | | | R1447481 | |
| Castillo | Krystle | 1225796568 | RADT I | 021 | |
| | | | | Ci3665102 | |
| Cleary | Michelle | 1871102947 | CCAPP Certified | 2 | |

| | | | | R1501090 |
|----------|---------|------------|------------------|----------|
| Echols | Amberly | 1205541984 | CCAPP Registered | 323 |
| | | | | A0634411 |
| Gaona | April | 1417538299 | CCAPP Certified | 23 |
| | | | | R1336710 |
| Garcia | Dolores | 1073155396 | RADT I | 219 |
| | | | | R1488541 |
| Gier | Karri | 1134839384 | CCAPP Registered | 122 |
| Gorman | Michael | 1760585897 | Physician | A68098 |
| | | | | SUDRC#17 |
| King | Justus | 1326813395 | CADTP Registered | 339 |
| | | | | A0444505 |
| McDowell | Paula | 1528576196 | CADC II | 17 |
| | | | | R1506005 |
| Mejia | Erica | 1386335024 | CCAPP Registered | 23 |
| Myers | Laura | 1386152593 | CADC I | 4 |
| | | | | C2113121 |
| Nelson | Beth | 1912548033 | CADC I | 4 |

| | | | | R1456920 |
|----------|-----------|------------|------------------|----------|
| Nunez | Veronica | 1235899303 | RADT I | 22 |
| | | | | R1547330 |
| Oliveira | Mackensey | 1962265041 | CCAPP Registered | 224 |
| | | | | R1339970 |
| Prather | Laci | 1154963916 | RADT I | 319 |
| | | | | R1465730 |
| Tyler | Kayla | 1427793413 | RADT I | 422 |
| | | | | R1469660 |
| Zapien | Felicia | 1386377844 | RADT I | 522 |

NARCOTIC TREATMENT PROGRAMS/MEDICATION ASSISTED TREATMENT

Program Name: Aegis
Treatment Center
Stockton LS

Program Description: Medically Supervised Methadone Maintenanc Detoxification (OTP) Outpatient Treatment (OTP) Medication Assisted Treatment

Type of Program: **SUD**

Address: 8626 North Lower Sacramento Road Suite 41

3747

Phone Number: (209) 478-

2487

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Non-English Languages:

Populations served: Adult and Adult Perinatal

Cultural Abilities: Adults, Older Adults, Veteran, Lesbian, Gay, Bisex

Stoffice Hours: Mon.- Fri. 5am - 12:30pm, Sat., Sun., Holidays 7am-11

website:https://pinnacletreatment.com/locations/

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|---------------------------|-----------|
| Acevedo | Maria | | | R1457020 |
| Acevedo | IVIdila | 1447903679 | CCAPP | 222 |
| Avala | Dichard | | | Aii052300 |
| Ayala | Richard | 1174746044 | CCAPP | 218 |
| | | | | C1483121 |
| Camacho | Nancy | 1679024632 | CADC-CAS | 4 |
| Coronado | Kainasse | 1427709922 | Licensed Vocational Nurse | 738965 |
| Estrada | Louis | 1265217244 | CADTP | 15538 |
| | | | | SUDRC |
| Flores | Ricky | 1649003401 | CADTP | 18738 |
| Garcia | Rogelio | 1811684749 | Psychiatric Technician | 42509 |

| Gonzales | Esperanza | 1003421314 | CADTP | SUDCC |
|---|---------------------------------------|----------------------------------|--|--------------|
| Hamilton | Robert | 1659791101 | Physician | A154190 |
| Kourm | Savan | 1215067228 | CADTP | 6568 |
| Magana | Sylvia | 1518651389 | Licensed Vocational Nurse | 729572 |
| Morones | Carisa | 1104360379 | Licensed Vocational Nurse | 290357 |
| Oakes | Marya | 1912978263 | Family Nurse Practitioner | NPF15701 |
| | | | | SUDCC630 |
| Williams | Ted | 1194954123 | CAS | 3 |
| | • | | | MY884006 |
| Yanos | Cyrus | 1073378113 | Nurse Practitioner | 0 |
| | ' | 10,00,0110 | Naise i lactitioner | |
| Program Nam Street Medica Stockton | ne: Aegis 5th | Program Desc | ription: Medically Supervised Methado OTP) Outpatient Treatment (OTP) Medica | ne Maintenan |
| Program Nam Street Medica | ne: Aegis 5th al Clinic am: SUD | Program Desc Detoxification (| ription: Medically Supervised Methado | ne Maintenan |
| Program Nam Street Medica Stockton Type of Progra Address: 1839 | ne: Aegis 5th al Clinic am: SUD | Program Desc Detoxification (| ription: Medically Supervised Methado | ne Maintenan |

| △よ | | Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisex | | | | |
|--------------------------|------------|---|---|-----------|--|--|
| | | Transgender | Transgender | | | |
| Non-English Languages: S | | Office Hours: | Office Hours: Monday - Friday 5am - 1pm Saturday, Sunday, and | | | |
| | | Holidays 7am - | 11am | | | |
| | | • | /pinnacletreatment.com/locations/ | | | |
| Last Name | First Name | NPI | Type of License | License # | | |
| Antolin | Rochelle | 1447748520 | SUDRC | 7706 | | |
| | | | | CiCA0226 | | |
| Beck | Victoria | 1730470295 | CADCI | 1119 | | |
| Crawford | Sarah | 1063700540 | SUDCC | 7266 | | |
| | | | | C0354509 | | |
| Galli | Andrew | 1740647361 | CADC | 15 | | |
| | | | | R1426680 | | |
| Gilbreath | Michelle | 1639750813 | RADT | 421 | | |
| Hamilton | Robert | 1386693547 | Physician | G48570 | | |
| Johnson | P. Curly | 1235770165 | Nurse Practitioner | 95012302 | | |
| | | | | R1290140 | | |
| Jones | Kent | 158812993 | RADT | 218 | | |
| Lu | Divina | 1316001381 | Licensed Vocational Nurse | 183039 | | |

| | | | | R1427270 |
|--|---------|------------|--|----------|
| Negrete | Dolores | 1447832464 | RADT | 421 |
| Nguyen | Linda | 1558886507 | SUDRC | 8051 |
| Palafox | Divina | 1912061995 | Licensed Vocational Nurse | 17300 |
| | | | | C0503701 |
| Pelletier | Steve | 1750652483 | CADC | 18 |
| Sandoval | Monique | 1396514584 | CADTP | 17283 |
| Talleur | Brian | 1659791101 | Physician | A164190 |
| Williams | Ginned | 1942363585 | SUDCCII | 6030 |
| Williams | Trisha | 1417493339 | CADTP | 6480 |
| Yanos | Cyrus | 1073378113 | Nurse Practitioner | 95028745 |
| Treatment Centers De | | | ription: Medically Supervised Methadon OTP) Outpatient Treatment (OTP) Medica | |
| Type of Program: SUD Address: 1947 N. California St. Ste. B&C | | | | |
| City: Stockton, CA 95204 | | | | |

Phone Number: 209) 463-

0870

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Populations served: Adult and Adult Perinatal

Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexu

Transgender

Office Hours: Monday - Friday 5am - 1pm Saturday, Sunday, and

Non-English Languages: St Holidays 7am - 11am

website: https://pinnacletreatment.com/locations/

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|---------------------------|-----------|
| Bellomo | Sebastian | 1063299444 | Registered Counselor | 15771 |
| Cano | Jacqueline | 1871149757 | Licensed Vocational Nurse | 238131 |
| Contreras | Liliana | 1376299214 | RADT | 322 |
| Coronado | Charlotte | 1851044069 | RADT | 720 |
| Ford | Leigh | 1790741197 | Nurse Practitioner | 5493 |
| Gonzalez | Vianey | 1336917558 | Licensed Vocational Nurse | 95204 |
| Johnson | Kaelyn | 1023824968 | Licensed Vocational Nurse | 74258 |
| | | | | R1559470 |
| Kaur | Jesmeen | 1356065593 | RADT | 424 |

| | T | T | T | T | | |
|-------------------------|---------------|--|---------------------------------|----------|--|--|
| | | | | R1507910 | | |
| Navarrete | Margarita | 1942991542 | RADT | 523 | | |
| | | | | R1590571 | | |
| Payton | Teara | 1235955634 | RADT | 224 | | |
| Sagarnaga | Cynthia | 1295886893 | Certified Counselor | 11025 | | |
| Talleur | Brian | 1659791101 | Physician | A154190 | | |
| Velasquez- | | | | | | |
| Rosales | Normita | 1609464114 | Licensed Psychiatric Technician | 41847 | | |
| Williams | Wayne | 1528552338 | Certified Counselor | 10097 | | |
| Program Nam | ne: Aegis | Program Description: Medically Supervised Methadone Maintenance | | | | |
| Treatment Ce | nters Lodi | Detoxification (OTP) Outpatient Treatment (OTP) Medication Assisted | | | | |
| Type of Progra | am SUD | Treatment | | | | |
| Address: 541 | South Ham | | | | | |
| Lane, Suite B | | | | | | |
| City: Lodi, CA | 95242 | | | | | |
| Phone Number: (209)224- | | Populations served: Adult and Adult Perinatal | | | | |
| ΔŁ. | | Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexu Transgender | | | | |

St Office Hours: Monday - Friday 5:00am - 6:00pm Saturday, Sunday, Non-English Languages: Holidays 7am - 12 PM website: https://pinnacletreatment.com/locations/ **Last Name** First Name NPI License # Type of License Crystal 1255808507 Licensed Vocational Nurse 695962 August 1407192297 260740 Licensed Vocational Nurse Campos John Castro Julie 1548927544 Licensed Psychiatric Technician 42133 1841251105 G47843 Chudy **Physician** Joseph A0513208 Galvez John 1487032322 Certified Alcohol and Drug Technicia 19 Mark Registered Alcohol and Drug Technid 15103 Garcia 1962102079 Carol 1033327358 Certified Alcohol and Drug Counselo 7332 Jacinto Johnson Alexandria 1407568686 Licensed Vocational Nurse VN710544 Certified Alcohol and Drug Technicia 12629 **Nicolette** 1659039758 **Patron** Certified Alcohol and Drug Technicia 207544 II 1184194169 Perez Chris Registered Alcohol and Drug Technid 9798 Jennifer 1043866627 Preap 1255956520 Physician and Surgeon A Rabah Willeed A185348 1659791101 A154190 Talleur Brian Physician

| | | | Licensed Vocational Nurse and | |
|--|---------------|-------------------------------------|--|-----------|
| Townsell | Christina | 1245053354 | Psych Tech | 29535 |
| Trunnell | Kathryn | 1093032559 | Certified Alcohol and Drug Technicia | 6541 |
| Tun | Suehei | 1548673999 | Registered Alcohol and Drug Technic | 7228 |
| Vu | Mary | 1407500952 | Licensed Psychiatric Technician | 42138 |
| White | Kimberly | 1649459546 | Certified Alcohol and Drug Technicia | 6413 |
| Program Nam Treatment Cer Manteca | _ | _ | ription: Medically Supervised Methadone OTP) Outpatient Treatment (OTP) Medica | |
| Type of Progra Address: 955 C Suites 12A & 1 | Center Street | | | |
| City: Manteca, | CA 95337 | | | |
| Phone Number: (209)239- 9600 | | Populations se | erved: Adult and Adult Perinatal | |
| Transgender | | Transgender | es: Adults/Older Adult, Veterans, Lesbian | · |
| Non-English Languages: Spanolidays 8a | | Office Hours: Molidays 8am - | Monday - Friday 5:30am - 1pm Saturday 11 am | , Sunday, |

| | | website: https:// | /pinnacletreatment.com/locations/ | |
|--------------|------------|-------------------|-----------------------------------|-----------------|
| Last Name | First Name | NPI | Type of License | License # |
| Brown | Cenarus | 1639742778 | SUDRC | 12122 |
| Cortez | Monica | 1316487572 | NA | NA |
| Danzig | Abigail | 1619790169 | RADT | R1586541 124 |
| Duenas | Cinthia | 1497401186 | SUDRC | 13008 |
| Falcon | Christina | 1154898393 | Licensed Vocational Nurse | 175628 |
| Gonzales | Katryn | 1750106373 | Licensed Vocational Nurse | 736533 |
| Hamilton | Robert | 1386693547 | Physician | G48570 |
| Jane Davis | Mary | 1861822744 | Licensed Vocational Nurse | 72342 |
| Jimenez-Cuev | Jennifer | 1336873959 | SUDRC | 15506 |
| | | 1831915883 | | R1586911 |
| Kolleh | Esther | | RADT | 124 |
| McClendon | Teresa | 1336291897 | CADC-CAS | C27861214 |
| Mohr | Rebecca | 1154898302 | Licensed Psychiatric Technician | 26531 |

| Palacios- | | 1558081752 | | |
|-----------|-----------|------------|---------------------------------|-----------|
| Reyes | Danessa | | Licensed Vocational Nurse | 687867 |
| Salas | Graciela | 1417602038 | Licensed Psychiatric Technician | 42180 |
| Sanchez | Nelson | 1801639133 | Nurse Practitioner | 95029771 |
| Sandhu | Sukhjit | 1629628763 | Nurse Practitioner | 95012835 |
| Sauers | Elizabeth | 1922877950 | Licensed Vocational Nurse | 687574 |
| Smith | Robin | 1538682927 | CADC-CAS | C21131214 |
| Thiompson | Shirley | 1528424470 | SUDCC III | 9502 |
| Vang | Down | 1336654672 | SUDCC II | 12547 |
| Yohana | Evet | 1447964283 | SUDRC | 16732 |
| D | | | ' (' NA ' O ' | N 4 1 1 |

Treatment Center

|Program Name: MedMark |Program Description: Medically Supervised Methadone Maintenance Detoxification (OTP) Outpatient Treatment (OTP) Medication Assisted **Treatment**

Type of Program **SUD**

Address: 1111 N. El

Dorado St.

City: Stockton, CA 95202

Phone Number: (209) 938-

0228

Populations served: Adult and Adult Perinatal

| ΔŁ | | Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisext Transgender Office Hours: Monday - Friday 5am - 1pm Saturday, Sunday, and | | | |
|----------------|---------------|--|---------------------------------------|-------------|--|
| Non-English La | anguages: Spa | Holidays 7am-11am | | | |
| | | | nedmark.com/medmark-treatment-centers | s-stockton/ | |
| Last Name | First Name | NPI | Type of License | License # | |
| AHERN | DENISE | 1093203911 | CERTIFIED COUNSELOR | 191227 | |
| ESCLOVON | LACI | 1609489731 | MEDICAL ASSISTANT | NA | |
| GARCIA | BRITTANY | 1699394965 | CADTP | 12372 | |
| GONZALEZ | ADELITA | 1972962488 | REGISTERED COUNSELOR | 6110 | |
| HARRIS | DANA | 1760995781 | CADTP | 6203 | |
| HOLIDAY | BRENDA | 1306839352 | Nurse Practitioner | 15461 | |
| KOUM | SAVAN | 1215067228 | CADTP | 6568 | |
| | | | | R1446051 | |
| LABASS | SHELLY | 1295489029 | CCAPP | 021 | |
| LENADADO | JERRI | 1477616910 | Licensed Vocational Nurse | 170115 | |
| LO | LAWRENCE | 1770122384 | REGISTERED COUNSELOR | 10180 | |
| PENA | ANNA | 1972667236 | CADTP | 6197 | |
| SCOTT | MELISSA | 1093474512 | CCAPP | 132186 | |
| SCOTT | WILLIAM | 1710639398 | CCAPP | 132070 | |

| WILLIAMS | JAY FRANK | 1760049043 | CERTIFIED COUNSELOR | 2014156 |
|--|----------------------|---|---|-----------------|
| WILLIAMS | TRISHA | 1417493339 | CADTP | 6480 |
| WILLIAMSON | ERNEST | 1649782954 | CADTP | 6388 |
| Program Nam | e: Towns | Program Desc | ription: Intensive Outpatient and Outpatie | ent services. |
| Health Service | es | ASAM level I ar | nd ASAM level II.1 | |
| Type of Program SUD Address: 750 Spaans Dr. Ste C, D, and F | | | | |
| City: Galt, CA | City: Galt, CA 95632 | | | |
| Phone Number: (209) 744- Populations 9909 | | | erved: Adults 18 years of age and older | |
| ۵Ł | | Cultural Abiliti | es: All required in addition to Veterans, L | GBT, Older |
| Non-English La | anguages: Spa | Office Hours: | Monday - Friday 8am - 5pm Saturday 9a | am - 4pm |
| Farci | | website: https://townshealthservices.com/ | | |
| Last Name | First Name | NPI Type of License | | License # |
| Blake | Aledria | 1447022314 | RADT | R1530981 023 |

| D | Dalassas | | | R1573190 |
|-----------|-------------|------------|-----------------------|-----------|
| Bocage | Rebecca | 1144050600 | Registered with CCAPP | 824 |
| Drown | Vanassa | | | R1506540 |
| Brown | Vanessa | 1043900913 | RADT | 523 |
| | | | | R1475100 |
| Castaneda | Iririan | 1427783000 | CCAPP Registered | 722 |
| | | | | R1475080 |
| Cobb | Robert | 1477288751 | RADT | 722 |
| | | | | Ci3734012 |
| Cross | Kendra | 1932775814 | CADC1 CS | 3 |
| | | | | R1472650 |
| Cross | Tanisha | 1679204291 | RADT | 622 |
| | | | | SUDCC |
| Delong | Tammi | 1972150514 | Certified CADPT 1 | 6085 |
| | | | | R1531481 |
| Espinoza | Patricia | 1801678966 | RADT | 023 |
| Gaylor | Joseph | 1528721248 | RADT | 12442 |
| | | | | R1538771 |
| Harnden | Christopher | 1689441297 | RADT | 223 |

| Huihui-Barke | Stephanie | 166598652 | SUDRC II | 14939 |
|--------------|-----------|------------|--------------------------------|-----------|
| | | | | R1573210 |
| Laform | Janell | 1316777881 | Registered with CCAPP | 824 |
| | | | | SUDRC173 |
| Lovan | Andre | 1841055936 | CDAPT- RADT | 41 |
| | | | | SUDRC |
| Luna | Rhonda | 1164243390 | Registered with CADTP | 19017 |
| | | | | R1438520 |
| Maxey | Heather | 1104498658 | RADT | 721 |
| | | | | R1507120 |
| Perkins | Nathen | 1770273641 | RADT | 523 |
| | | | | R1570890 |
| Schneider | Savannah | 1588492227 | Registered with CCAPP | 724 |
| Towns | Mark | 1811183643 | Physician/Addiction Specialist | A100676 |
| | | | | Ci3156122 |
| Ulm | Mathew | 1013402015 | CCAPPII | 0 |
| | | | | R1510320 |
| Woodworth | Julia | 1699550889 | RADT | 623 |

| Program Nam Circle of Frier | | Program Desc | ription: Inpatient Residential Treatment | |
|---|---------------|--|--|-----------|
| Type of Progra Address: 3128 Street | | | | |
| City: Stockton, 3905 | CA 95205- | | | |
| Phone Number 0315 | r: (209) 451- | Populations se | erved: Adult Male Non-Perinatal | |
| △ & | | Cultural Abilities: Veterans, Adults, Older Adults, Gay, Transgender | | |
| Non-English La | anguages: | Office Hours: 24 Hours | | |
| | | website: none | | |
| Last Name | First Name | NPI | Type of License | License # |
| Duvdevany | Neta | 1598180341 | Physician | C137556 |
| | | | | C0595111 |
| Campbell | Ernest | 1124390109 | SAC I | 18 |
| Estrada | Michael | 1275517617 | SAC I | 5919 |
| Hatten | Stephanie | 1730471384 | SAC II | C19391214 |

Program Name: New

Directions

Type of Program **SUD**

Address: 1981 Cherokee

Road

City: Stockton, CA 95205

Phone Number: (209)850-

6500

ОĠ

Non-English Languages:

Program Description: Residential and outpatient

Populations served: Adult male and female clients

Cultural Abilities:

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

website: www.newdirectionsstockton.org

| Last Name | First Name | NPI | Type of License | License # |
|-----------|------------|------------|--------------------|-----------|
| Abitia | Rita | 1356178438 | CATC | 24935 |
| Apilado | Jamie | 1356059901 | Case Worker | 13974 |
| Benner | Dale | | Executive Director | |
| Bennet | Calvin | 1831905868 | CADTP | 20127 |
| Dixon | Jeanette | 1063657757 | Counselor | 8067 |
| Gibson | James | 1841908183 | Case Worker | 12191 |

| Gorrell | Roxanne | 1467165761 | CADTP - Case Worker | 14155 |
|---------------|----------|------------|-------------------------------|-----------|
| Harper | Greta | 1265140511 | CADTP - Case Worker | 14224 |
| Houser | Kimberly | 1689382566 | CADTP - Case Worker | 13976 |
| Ibea | Raquel | 1255054276 | Case Worker | 13037 |
| Jazulin | Steve | | Program Director | |
| King | Ruby | 1972177665 | Counselor | 8062 |
| Liberty | Leslie | 1427649318 | LPHA/LSCW | 17173 |
| Limas | Richard | 1518630953 | Counselor | 7346 |
| Matas | James | 1639743974 | Counselor | 7267 |
| | | | Associate Marriage and Family | Aii063280 |
| Mero | Kathy | 1316069495 | Therapist | 122 |
| Newton | Deborah | 1063086197 | SUD Counselor | 9469 |
| Poirier-Brode | Karen | 1144246547 | Physician | A26767 |
| Rice | Debra | 1124692991 | SUD Counselor | 8618 |
| Rico | Ethan | 1659089902 | CADTP - Case Worker | 14223 |
| Schopp | Diane | 1457925091 | SUD Counselor | 9781 |
| Sexton | Timothy | 1407529886 | SUD Counselor | 9517 |
| Shelton | Tiffany | 1891471777 | CADTP- SUD Case Worker | 15344 |
| Smith | Denise | 1932773579 | SUD Counselor | 7568 |
| | • | • | | |

| | | | | RH001148 |
|---------|---------|------------|---------------------|----------|
| Tillman | Stella | NA | CCAPP | 0923 |
| Vega | Jocelyn | 1386357739 | CADTP - Case Worker | 14271 |
| Ybanez | Elodia | 1114606449 | SUD CADTP | NA |

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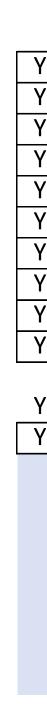
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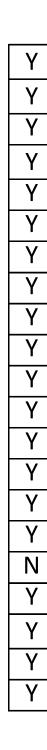
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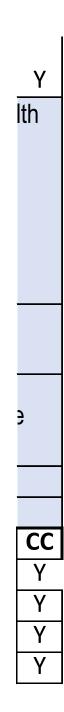
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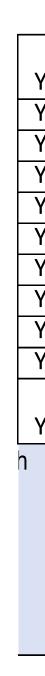


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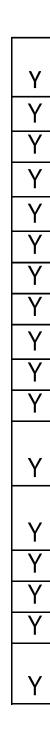




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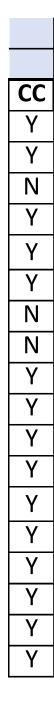


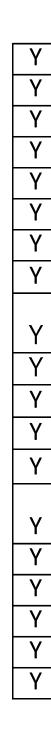
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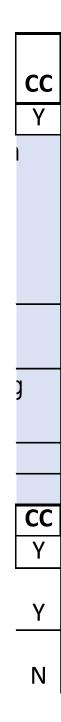




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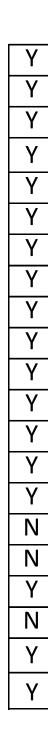


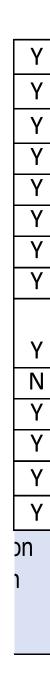


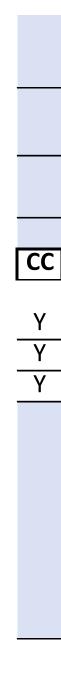
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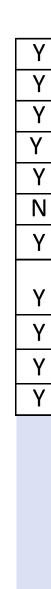
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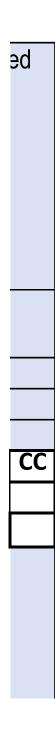
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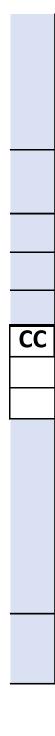
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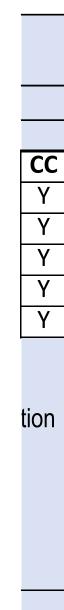
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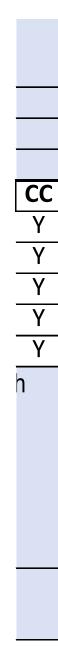
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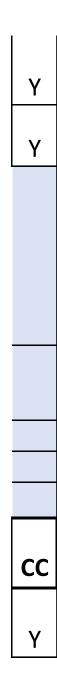
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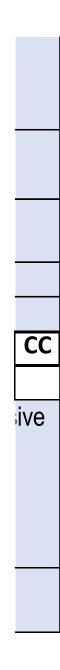
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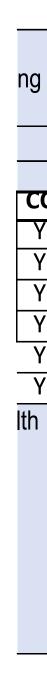
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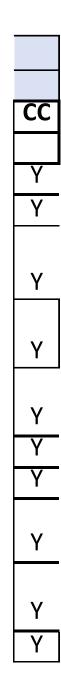
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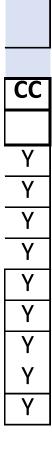








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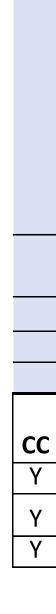






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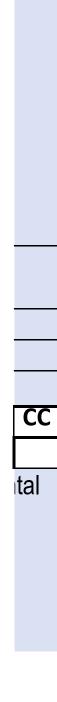
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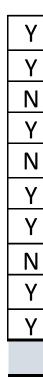
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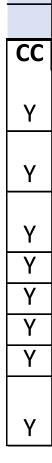




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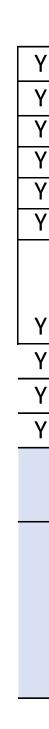




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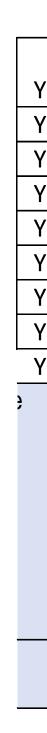
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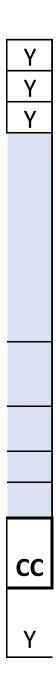
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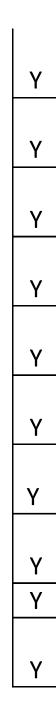
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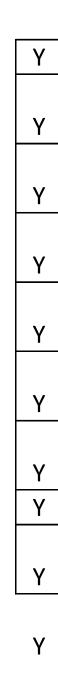


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