

# **Behavioral Health Services**

A Division of Health Care Services Agency

Fay Vieira, LMFT, Interim BHS Director Cara Dunn, BHS Assistant Director

# **County and Contract Medi-Cal Providers Directory**

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

# This Document is Searchable

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

#### **English**

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

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

#### **Español (Spanish)**

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

### <u>Tiếng Việt (Vietnamese)</u>

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

#### <u>Tagalog (Tagalog – Filipino)</u>

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

# <u>한국어 (Korean)</u>

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

#### 繁體中文(Chinese)

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

# <u> Յալերեն (Armenian)</u>

ՈԻՇԱԴՐՈԻԹՅՈԻՆ` Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ։ Չանգահարեք 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 (Farsi)

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. ب 1-888-848-9370 (TTY: 711) تماس بگیرید.

## 日本語 (Japanese)

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

#### **Hmoob (Hmong)**

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

ਪੰਜਾਬੀ (Punjabi)

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

#### العربية (Arabic)

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

# हिंदी (Hindi)

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

# ภาษาไทย (Thai)

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

# ខ្មែរ (Cambodian)

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

#### ພາສາລາວ

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 working under the direction of a licensed practitioner operating within their scope of practice. Only licensed, waivered, or registered mental health providers and licensed substance use disorder services providers are listed on the Plan's provider directory.

MH = Mental Health Progam and Practitioners

SUD = Substance Use Disorder Program and Practitioners

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

NPI = National Provider Identifier number

CC = Cultural Abilities Training completed

ICC = intensive Care Coordination

IHBS = Intensive Home Based Services

ASL = \*American Sign Language

Program Name: Access Services/Specialties/Modalities Program Provides: Screenings, CalAIM Assessments, Managed Care #39DH case management, linkage, rehab, and medication monitoring services per MD. Type of Program: MH and SUD Program Address: 620 N. Aurora St. Suite City: Stockton, CA 95202 Phone Number: (209) 468-9370 Telehealth Services Provided: Yes Lingustic capabilities: **Accepting New Members:** Yes Interpreter services are available for languages other than English. Accepting Children's Health Insurance Program (CHIP) Members? N/A E Populations served: Children/Youth and Adults. Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday-Friday 8:00am-5:00pm website: https://www.sjcbhs.org License # CC and Last Name First Name NPI Type of License and Exp Date Date 19122741 Denise 1093203911 Certified Addiction Treatment Counselor 11/15/2025 5/16/2025 Ahern 133151 6/30/2026 Baker Ashley 1225640535 Licensed Marriage and Family Therapist 1/15/2025 103981 Luis 1346599677 Licensed Marriage and Family Therapist 8/3/2025 Garcia Y 2/3/2025 120727 1/31/2026 Martinez Adriana 1831669480 Associate Clinical Social Worker Y 7/2/2025 127924 4/30/2025 12/3/2026 Nease Desiree 1447703491 Licensed Clinical Social Worker Bii00640223 Richardson Douglass 1609346402 Certified Alcohol and Drug Counselor III 3/28/2027 Y 5/8/2025 173 Licensed Professional Clinical Counselor 12/31/2025 Y 1/1/2018 Wieland Jessica 1164751392 Program Name: Black Services/Specialties/Modalities Program Provides: Medication services. Awareness Community Outreach Program / Multicultural Services. (BACOP/MC) Full Service Partnership (MHSA) #9090 Type of Program: MH

| Address: 1212 N<br>Street<br>City: Stockton, CA                       |                |  |  |                    |                |  |  |
|---|----------------|--|--|--------------------|----------------|--|--|
| Phone Number:(  | 209) 468-2337  | Telehealth Serv  | ices Provided: Yes   |                    |                |  |  |
| Lingustic capabi  | lities:        | Accepting New  | Members: Yes   |                    |                |  |  |
| Interpreter service for languages other                               |                | Accepting Child  | Iren's Health Insurance Program (CHIP) Mem                   | nbers? N/A         |                |  |  |
| E.  |                | Populations ser  | ved: Adults.   |                    |                |  |  |
| O <sup>z</sup>  |                | <b>Cultural Abilitie</b>   | s:Veterans, Older Adults, Transitional Age You               | th, Lesbian, Gay   | , Bisexual,    |  |  |
|   |                | or Transgender.  |  |                    |                |  |  |
|   |                | Office Hours: M  | onday- Friday 8:00am - 5:00 pm                               |                    |                |  |  |
|   |                | website: https://w   | ww.sjcbhs.org/adult.aspx                                     |                    |                |  |  |
|   |                |  |  |                    |                |  |  |
|   |                |  |  | License #          | CC and         |  |  |
| Last Name   | First Name     | NPI  | Type of License  | and Exp Date       | Date           |  |  |
|   |                |  |  | 723203             | Υ              |  |  |
| Cruz  | Gloria         | 1104375724   | Registered Nurse   | 9/30/2027          | 5/16/2025      |  |  |
| Hallannall  | Chialo.        | 1124142474   | Dogistared Names   | 352081<br>11/30/25 | Y<br>7/25/2025 |  |  |
| Hollowell  Program Name:  | Shirley        | 1124143474   | Registered Nurse  Ities/Modalities Program Provides: Compreh |                    |                |  |  |
| Type of Program<br>Address: 620 N.<br>305 & 306<br>City: Stockton, C. | Aurora St. Ste | services including therapy for mild to moderate symptoms, case management, and skill building. |  |                    |                |  |  |
| Phone Number:(  | 209) 468-2385  | Telehealth Services Provided: Yes  |  |                    |                |  |  |
| Lingustic capabi  | lities:        | Accepting New Members: Yes   |  |                    |                |  |  |
| Interpreter service for languages other                               |                | Accepting Children's Health Insurance Program (CHIP) Members? N/A                              |  |                    |                |  |  |
| Ġ.  | _              | Populations served: Children/Youth.  |  |                    |                |  |  |
| ٥   |                | Cultural Abilities: Transitional Age Youth.  |  |                    |                |  |  |
|   |                | Office Hours: Monday-Friday 8:00am-5:00pm  |  |                    |                |  |  |
|   |                | website: https:w   | ww.sjcbhs.org/children_and_youth.aspx                        |                    |                |  |  |
|   |                |  |  |                    |                |  |  |
|   | P' 1 5 !       | l ne   | T 61:  | License #          | CC and         |  |  |
| Last Name   | First Name     | NPI  | Type of License  | and Exp Date       | Date           |  |  |
|   |                |  |  | 71535              | Υ              |  |  |
| Guitierrez  | Antonio        | 1023473469   | Licensed Clinical Social Worker                              | 11/30/2025         | 1/18/2018      |  |  |
| Guideriez   | AIROIIIO       | 1023473403   | LICENSCO CHINCAI SOCIAI WOLKEI                               | 78609              | 1/ 10/ 2010    |  |  |
| Hudson  | Mark           | 1528190725   | Licensed Marriage and Family Therapist                       | 5/31/2027          | Y 1/1/2018     |  |  |

**Program Name:** Children and Youth Services, Stockton Clinic

(CYS) #3915

Type of Program: MH

Address: 1414 N California St City: Stockton, CA 95202

Phone Number: (209) 468-2385 Lingustic capabilities:

Interpreter services are available for languages other than English.

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**Services/Specialties/Modalities Program Provides**: Individual therapy, clinical rehab, TCM/ICC, Assessment.

Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Children/Youth.

Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender.

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 #<br>and Exp Date | CC and<br>Date |
|-----------|------------|------------|---|---------------------------|----------------|
|           |            |            |   | A105923                   | Υ              |
| Ansari    | Shaukat    | 1821294455 | Physician                               | 10/31/2026                | 6/30/2024      |
|           |            |            |   | 113413                    | Υ              |
| Avilla    | Krystal    | 1003386442 | Associate Social Worker                 | 1/31/2026                 | 3/26/2024      |
|           |            |            |   | 117314                    | Υ              |
| Contreras | Jessica    | 1639890411 | Associate Social Worker                 | 8/31/2025                 | 7/21/2025      |
|           |            |            |   | 135632                    | Υ              |
| Corral    | Mercedes   | 1104583996 | Associate Marriage and Family Therapist | 11/30/2025                | 8/30/2025      |
|           |            |            |   |                           |                |
| Curtiss   | Megan      | 1265836027 | Licensed Marriage and Family Therapist  | 123655                    | Y 1/1/2018     |
|           |            |            |   | 114558                    | Υ              |
| Demers    | Jennifer   | 1386124436 | Associate Clinical Social Worker        | 3/31/2026                 | 11/7/2023      |
|           |            |            |   | A158459                   |                |
| Deshmukh  | Poonan     | 1396165056 | Physician                               | 9/30/2026                 | Υ              |
|           |            |            |   | 156958                    |                |
| Fernandes | Matthew    | 1851273932 | Associate Marriage and Family Therapist | 8/31/2026                 | Y 8/1/2025     |
|           |            |            |   | 126901                    |                |
| Gipaya    | Juanita    | 1235500042 | Licensed Marriage and Family Therapist  | 7/31/2025                 | Y 4/4/2024     |
| Gonzalez- |            |            |   | 142162                    | Υ              |
| Barragen  | Stephanie  | 1538808266 | Associate Marriage and Family Therapist | 10/31/2025                | 7/18/2025      |
|           |            |            |   | A112447                   | Υ              |
| Hira Brar | Shabneet   | 1851598452 | Physician                               | 4/30/2026                 | 3/14/2025      |
|           |            |            |   | 116581                    |                |
| Jacobo    | Carla      | 1851858534 | Associate Social Worker                 | 7/31/2026                 | Y 8/1/2025     |
|           |            |            |   | C53847                    |                |
| Kamran    | Muhammed   | 1811051337 | Physician                               | 2/28/2027                 | Υ              |

|  |             |   | 1                                       | A179803    |  |            |  |                 |
|--|-------------|---|---|------------|--|------------|--|-----------------|
| Khan   | Zershana    | 1023674835  | Physician                               | 8/31/2026  | Υ  |            |  |                 |
| Kilali   | Zersnana    | 1023074833  | Filysiciali                             | A151187    | Y  |            |  |                 |
| Kumar  | Gaurav      | 1235513102  | Physician                               | 1/31/2027  | 2/23/2023                                  |            |  |                 |
| Kuillai  | Gaurav      | 1233313102  | ritysician                              | 125431     | V  |            |  |                 |
| Lindsey Franco   | Diane       | 1730648122  | Associate Social Worker                 | 8/31/2025  | 7/22/2025                                  |            |  |                 |
| Emasey Franco  | Diane       | 1730010122  | 7.535clate 35clal Worker                | 141235     | γ  |            |  |                 |
| Lopez  | Alexis      | 1932767225  | Licensed Marriage and Family Therapist  | 8/31/2025  | 1/27/2025                                  |            |  |                 |
|  |             |   | , ,                                     | 127652     | Y  |            |  |                 |
| Navarro  | Elizabeth   | 1801242771  | Licensed Clinical Social Worker         | 12/31/2026 | 12/4/2024                                  |            |  |                 |
|  |             |   |   | 142826     | Υ  |            |  |                 |
| Ohnmacht   | Priscilla   | 1982460663  | Associate Marriage and Family Therapist | 11/30/2025 | 2/19/2025                                  |            |  |                 |
|  |             |   |   | 737453     | Υ  |            |  |                 |
| Platon   | Marian      | 1992410336  | Registered Nurse                        | 1/31/2026  | 7/21/2025                                  |            |  |                 |
|  |             |   |   | 111415     | Υ  |            |  |                 |
| Reyes  | Irene       | 1760189534  | Associate Clinical Social Worker        | 10/31/2025 | 2/15/2023                                  |            |  |                 |
|  |             |   |   | 99638      | Υ  |            |  |                 |
| Rhone  | Danevia     | 1114650405  | Associate Clinical Social Worker        | 1/31/2026  | 7/13/2022                                  |            |  |                 |
|  |             |   |   | C175781    | Y  |            |  |                 |
| Saluja   | Amandeep    | 1588894778  | Physician                               | 12/31/2025 | 6/30/2024                                  |            |  |                 |
| - Caraja   | / штана сер |   |   | 125290     | Υ  |            |  |                 |
| Shah   | Benita      | 1407311103  | Associate Social Worker                 | 8/31/2025  | 7/21/2025                                  |            |  |                 |
|  |             |   |   | 123850     | Υ  |            |  |                 |
| Singh  | Aneesha     | 1649935743  | Associate Social Worker                 | 7/31/2025  | 4/17/2025                                  |            |  |                 |
|  |             |   |   | 559310     |  |            |  |                 |
| Washington   | Kerry       | 1689391997  | Registered Nurse                        | 2/28/2027  | Y 7/2/2025                                 |            |  |                 |
|  |             |   |   | 113407     |  |            |  |                 |
| White  | Grace       | 1659146371  | Associate Clinical Social Worker        | 1/31/2026  | Y 11/27/24                                 |            |  |                 |
| Program Name: Children and<br>Youth Services - Foster Youth<br>Full Service Partnership (MHSA)<br>#9096<br>Type of Program: MH<br>Address: 620 N. Aurora Street<br>Ste 4<br>City: Stockton, CA 95202<br>Phone Number:(209) 468-2385<br>Lingustic capabilities: |             | Services/Specialties/Modalities Program Provides: Assessment, Psychotherapy, Intensive Care Coordination, Intensive Home Based Services, Psychiatric services and medication support. |   |            |  |            |  |                 |
|  |             |   |   |            |  |            |  | Telehealth Serv |
|  |             | Accepting New Members: Yes  |   |            |  |            |  |                 |
|  |             | Interpreter service   |   |            | dren's Health Insurance Program (CHIP) Men | nbers? N/A |  |                 |
| for languages oth  |             |   | 3 · · · · · · · · · · · · · · · · · · · |            |  |            |  |                 |
|  |             | Populations ser   | rved: Children/Youth.                   |            |  |            |  |                 |
| Ė  |             | -   | s: Transitional Age Youth.              |            |  |            |  |                 |
|  |             | Talibilional Age Tulli.   |   |            |  |            |  |                 |

|  |            | Office Hours: M   | onday - Friday 8:00 am - 5:00 pm          |                                     |                     |
|--|------------|---|---|-------------------------------------|---------------------|
|  |            |   | www.sjcbhs.org/children_and_youth.aspx    |                                     |                     |
| Last Name  | First Name | NPI   | Type of License                           | License #<br>and Exp Date           | CC and<br>Date      |
| Ansari   | Shaukat    | 1821294455  | Physician                                 | 105923<br>10/31/2026                | Y<br>6/30/2024      |
| Barajas  | Lauren     | 1154893683  | Licensed Clinical Social Worker           | 101688<br>5/31/2027<br>81226        | Y<br>7/11/2025<br>Y |
| Guerrero<br>Hernandez  | Melissa    | 1467946301  | Licensed Marriage and Family Therapist    | 2/28/2026<br>133517                 | 8/25/2025           |
| Luna   | Estefania  | 1053011932  | Associate Clinical Social Worker          | 8/31/2026<br>117262                 | Y 9/3/2025<br>Y     |
| Herron   | Rita       | 1659629285  | Licensed Marriage and Family Therapist    | 1/31/2026<br>96813                  | 7/22/2025<br>Y      |
| Olivares-Rivas   | Yulisa     | 1801445085  | Associate Clinical Social Worker          | 9/30/2025                           | 4/15/2024<br>Y      |
| Payne  | Sheilena   | 1336437656  | Licensed Marriage and Family Therapist    | 11/30/2025<br>10658                 | 7/17/2025           |
| Pinon  | Karen      | 1518572320  | Associate Professional Clinical Counselor | 11/30/2025                          | Y 5/7/2024<br>Y     |
| Sneed  | Kasey      | 1083340186  | Associate Marriage and Family Therapist   | 128132                              | 9/16/2025<br>Y      |
| Wilkinson  | Lauren     | 1376145581  | Associate Clinical Social Worker          | 1/31/2026                           | 3/14/2025           |
| Program Name: S.J.C. Children and Youth Services - Foster Youth Full Service Partnership Intake (MHSA) #39DF  Type of Program: MH  Address: 333 E. Washington Street  City: Stockton, CA 95202  Phone Number: (209) 468-1547  Lingustic capabilities: Interpreter services are available for languages other than English. |            | Management/Bro including Individuand Crisis Intervent  Telehealth Servent Accepting New Accepting Child Populations ser Cultural Abilitie Office Hours: M | ices Provided: Yes                        | CC), Mental Hea<br>HBS), Medication | i Support,          |
| Last Name  | First Name | NPI   | Type of License                           | License #<br>and Exp Date           | CC and<br>Date      |

|  | I             | I   | T  | 425606                    |                  |
|--|---------------|---|--|---------------------------|------------------|
|  |               | 4760456640  |  | 125696                    | Υ                |
| Alvarado   | Jorie Mae     | 1760156640  | Associate Clinical Social Worker   | 9/30/2026                 | 12/5/2024        |
| Blanco Herrada   | Clare         | 1670022000  | Licensed Marriage and Femily Theresist   | 146299                    | Y<br>2/25/2025   |
|  | Clara         | 1679823900  | Licensed Marriage and Family Therapist   | 4/30/2026                 | 2/25/2025        |
| D :  | N.A.a.vi.a    | 1610515640  | A siste NAs wises and Family Theoremiat  | 130181                    | Y<br>4 /22 /2025 |
| Dominguez  | Maria         | 1619515640  | Associate Marriage and Family Therapist  | 12/31/2025                | 1/23/2025        |
| Haidanbara   | Dradlay       | 1255764627  | Licensed Marriage and Family Therapist   | 98495                     | Y<br>7/22/2025   |
| Heidenberg   | Bradley       | 1255764627  | Licensed Marriage and Family Therapist   | 3/31/2027<br>136814       | 7/23/2025        |
| Morric   | Allia         | 1002205165  | Associate Marriage and Family Therenist  |                           | Y<br>1/22/2025   |
| Morris   | Allie         | 1982305165  | Associate Marriage and Family Therapist  | 12/27/2025<br>75192       | 1/23/2025<br>Y   |
| Dollock  | Looro         | 1245662426  | Licensed Clinical Social Worker  |                           | ·                |
| Pollock  | Leora         | 1245663426  | Licensed Clinical Social Worker  | 8/31/2026<br>119854       | 7/23/2025<br>v   |
| Sanchez  | Luis          | 1982395760  | Associate Clinical Social Worker   | 12/31/2025                | 7/14/2025        |
| Program Name:  |               |   | Associate Clinical Social Worker  alties/Modalities Program Provides: TCM, Re  |                           |                  |
| Teams A, B, and D) #9069  Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202  Phone Number:(209) 468-8842  Lingustic capabilities: Interpreter services are available for languages other than English. |               | Accepting New Accepting Child Populations ser Cultural Abilitie or Transgender. | dren's Health Insurance Program (CHIP) Men   |                           | /, Bisexual,     |
|  |               |   | www.sjcbhs.org/adult.aspx  |                           |                  |
| Last Name  | First Name    | NPI   | Type of License  | License #<br>and Exp Date | CC and<br>Date   |
| A  | N 4 = 1 × 2 = | 1205007170  | liana de Manuisco de de Control d | 144333                    | Y<br>7/22/2025   |
| Aguirre Luna   | Mayra         | 1285007179  | Licensed Marriage and Family Therapist   | 1/31/2026                 | 7/22/2025        |
| Ch alus  | N.A.o.wi -    | 1275000055  | Licensed Manniers and Fault There is   | 139853                    | Y<br>1/21/2025   |
| Cholua   | Marie         | 1275098055  | Licensed Marriage and Family Therapist   | 6/30/2027                 | 1/31/2025        |
| Chavi  | Claudatanalaa | 1124520400  | Linemand Davishistois Table 1111   | 38077                     | V                |
| Chow   | Christopher   | 1124530100  | Licensed Psychiatric Technician  | 10/31/2026                | Υ                |
| Charles  | O sima m      | 1002002704  | Lianna d Clinical Castal Mark I as   | 81785                     | V 10/25/22       |
| Chukwuka   | Ogiram        | 1063662781  | Licensed Clinical Social Worker  | 10/31/2025                | Y 10/25/23       |
| C  | Ni a a La     | 4444764300  |  | 156232                    | Y<br>C/20/2025   |
| Cowan  | Nicole        | 1144764390  | Licensed Marriage and Family Therapist   | 7/31/2027                 | 6/30/2025        |

|  | I           | 1          | T   | I          |              |
|--|-------------|------------|---|------------|--------------|
|  |             |            |   | 723203     |              |
| Cruz   | Gloria      | 1104375724 | Registered Nurse                          | 9/30/2027  | Υ            |
|  |             |            |   | 18259      | Υ            |
| Cusumano   | Katherine   | 1659988822 | Licensed Professional Clinical Counselor  | 12/31/2026 | 7/28/2025    |
|  |             |            |   | 129274     | Υ            |
| De La Torre  | Yessica     | 1629817200 | Associate Clinical Social Worker          | 3/31/2026  | 3/25/2025    |
|  |             |            |   | 29826      |              |
| DeWitte  | Tiffany     | 1023143245 | Licensed Clinical Social Worker           | 3/31/2027  | Y            |
|  |             |            |   | 555151     | Υ            |
| Doronio  | Ramil       | 1871767376 | Registered Nurse                          | 2/28/27    | 2/13/2025    |
| Finney-  |             |            |   | 124294     |              |
| Hennings   | Drajwanee   | 1376175778 | Associate Clinical Social Worker          | 7/31/2026  | N            |
|  |             |            |   | 128269     | Υ            |
| Flores   | Henry       | 1998038657 | Licensed Marriage and Family Therapist    | 9/30/2025  | 9/20/2024    |
|  |             |            |   | 704233     | Υ            |
| Fojas-Garcia   | Ann Valerie | 1770606386 | Registered Nurse                          | 3/31/2027  | 1/18/2019    |
|  |             |            |   | 53745      | Υ            |
| Fullwood-Fleck   | Cynthia     | 1023247178 | Licensed Marriage and Family Therapist    | 7/30/2027  | 7/18/2025    |
|  |             |            |   | 95217456   |              |
| Gonzalez   | Mario       | 1083041685 | Registered Nurse                          | 9/30/2025  | Υ            |
|  |             |            |   | G70479     |              |
| Graff  | Robert      | 1366560112 | Physician                                 | 8/31/2026  | Υ            |
|  |             |            |   | 41966      |              |
| Heda-Krogh   | Noriko      | 1487341186 | Licensed Psychiatric Technician           | 11/30/2026 | Υ            |
|  |             |            | ,   | 29248      | Υ            |
| Helsby   | Sherri      | 1669893764 | Licensed Clinical Social Worker           | 6/30/2026  | 5/20/2025    |
| ,  |             |            |   | 9476       | · ·          |
| Herrera  | Karla       | 1427722461 | Associate Professional Clinical Counselor | 4/30/2026  | Υ            |
|  |             |            |   | 43283      | Υ            |
| Herrick  | Kara        | 1518191659 | Licensed Marriage and Family Therapist    | 3/31/2026  | 7/23/2025    |
|  |             |            |   |            | 1,10,100     |
| Holguin  | Shawna      | 1710420377 | Registered Nurse                          | 1606131    | Y 3/4/2025   |
|  |             |            |   | 352081     | Υ Υ          |
| Hollowell  | Shirley     | 1124143474 | Registered Nurse                          | 11/30/2025 | 7/25/2025    |
|  | ,cy         |            | Neglistered Harise                        | 96641      | Υ            |
| Jackson  | Sasha       | 1295181295 | Licensed Clinical Social Worker           | 9/30/2026  | 7/30/2025    |
| - Control of the cont | 045114      | 1230101233 | Zidenidea eminear dediar VVerker          | 108237     | Υ            |
| Jonney   | Jorly       | 1902155625 | Licensed Clinical Social Worker           | 5/31/2026  | 7/31/2025    |
|  | 33117       | 1302133023 | 2.32.324 Cilinou Social Worker            | 123987     | 7,31,2023    |
| Lee  | Mai         | 1770282824 | Associate Clinical Social Worker          | 7/31/2026  | Υ            |
| LCC  | iviai       | 1770202024 | A330Clate Cliffical 30Clar Worker         | 121616     | 1            |
| Ludol  | Siorra      | 1770145112 | Associate Clinical Social Worker          |            | V 8 /4 /2025 |
| Ludel  | Sierra      | 1770145112 | Associate Cillical Social Molker          | 3/31/2026  | Y 8/4/2025   |

|                   |                   |  |   | 128091              |              |  |
|-------------------|-------------------|--|---|---------------------|--------------|--|
| Maldonado         | Constance         | 1851192504   | Associate Clinical Social Worker                | 1/31/2026           | Y 4/2/2025   |  |
| a.a.a.a.a         |                   | 100110100.   | A sociate cimical occidi tverker                | 124386              | 1 1/2/2020   |  |
| Martin            | Ronee             | 1932644796   | Associate Marriage and Family Therapist         | 2/28/2026           | Y 2/1/2020   |  |
|                   | 1.0               |  | ,         | 40655               | Υ            |  |
| Martinez          | Celeste           | 1902305972   | Licensed Psychiatric Technician                 | 6/30/2027           | 6/22/2019    |  |
|                   |                   |  | ·   | 35949               | Υ            |  |
| McHenry           | Heidi             | 1861763294   | Licensed Psychiatric Technician                 | 9/30/2026           | 7/23/2025    |  |
|                   |                   |  |   | 791016              |              |  |
| McIntyre          | James             | 1871830620   | Registered Nurse                                | 12/31/2026          | Υ            |  |
|                   |                   |  |   | 25868               |              |  |
| Mendez            | Adeline           | 1255453353   | Licensed Psychiatric Techician                  | 1/31/2026           | Υ            |  |
|                   |                   |  |   | C53554              |              |  |
| Padala            | Nagamani          | 1659303253   | Physician                                       | 8/31/2026           | Υ            |  |
| C1-111            | F                 | 4427254447   | Physician                                       | A44865              | V            |  |
| Saddik            | Fouad             | 1437254117   | Physician                                       | 11/30/2027          | Y            |  |
| Saalaa            | Cindu             | 1255511614   | Licensed Clinical Social Worker                 | 82456               |              |  |
| Saelee            | Cindy             | 1255511614   | Licensed Clinical Social Worker                 | 10/31/2025          | 7/25/2025    |  |
| Salazar           | Kellie            | 1295273654   | Licensed Psychiatric Technician                 | 40326<br>2/28/2026  | Y 3/1/2020   |  |
| Salazai           | Keille            | 1293273034   | Licensed Esychiatric rechinician                | A68523              | 1 3/1/2020   |  |
| Soaros            | Ana               | 1922191410   | Physician                                       | 9/30/2026           | Υ            |  |
| Soares            | Ana               | 1922191410   | Physician                                       |                     |              |  |
|                   |                   |  |   | 113825              | Υ            |  |
| Sprague           | Helen             | 1710325642   | Licensed Marriage and Family Therapist          | 6/30/2027           | 7/22/2025    |  |
|                   |                   |  |   | 551864              |              |  |
| Tamayo            | Donnelle          | 1073871216   | Registered Nurse                                | 11/30/2026          | Υ            |  |
|                   |                   |  |   | 41847               | Υ            |  |
| Velasquez         | Normita           | 1609464114   | Licensed Psychiatric Techician                  | 8/31/2026           | 1/31/2025    |  |
|                   |                   |  |   | 41837               |              |  |
| Weekly            | Tony              | 1710572540   | Licensed Psychiatric Technician                 | 2/28/2026           | Υ            |  |
|                   |                   | 1000010010   |   | 86055               | γ            |  |
| Xiong             | Maly              | 1932218849   | Licensed Marriage and Family Therapist          | 12/31/2026          | 6/18/2025    |  |
| Zaragoza          | Alejandra         | 1346705381   | Associate Marriage and Family Therapist         | 137454<br>1/31/2026 | Υ            |  |
| Program Name      |                   |  | alties/Modalities Program Provides: Assist just |                     |              |  |
| Corrections Par   | •                 | _  | ervices and linkage to other community resource |                     | uiviuuais by |  |
| Type of Progra    | •                 | providing wire se  |   | C dild ool vioos.   |              |  |
| Address: 105 S    |                   |  |   |                     |              |  |
| Street            | J. Gair Goaquiii  |  |   |                     |              |  |
| City: Stockton,   | CA 95202          |  |   |                     |              |  |
|                   | er:(209)953-5466  | Telehealth Sen   | vices Provided: Yes                             |                     |              |  |
| Lingustic capa    | , ,               |  |   |                     |              |  |
|                   | ces are available | Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A |   |                     |              |  |
| interbreter servi | oos are available | y omi  |   |                     |              |  |

| 5 5   | other than English.  | Populations se   | rved: Adults.   |  |                |  |  |
|---|--|--|---|--|----------------|--|--|
| Ġ.  |  | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  |   |  |                |  |  |
| CL  |  |  | Nonday-Friday 8:00am-5:00pm   | ·  |                |  |  |
|   |  | website: https:/   | /www.sjcbhs.org/adult.aspx  |  |                |  |  |
| Last Name   | First Name   | NPI  | Type of License   | License #                                    | CC and<br>Date |  |  |
|   |  |  | 7.  | 102725                                       | Υ              |  |  |
| Amador  | Keith  | 1891127403   | Licensed Marriage and Family Therapist  | 4/30/2027                                    | 9/20/2024      |  |  |
|   |  |  |   | 94833  |                |  |  |
| Arellano  | Valerie  | 1508275850   | Associate Clinical Social Worker  | 5/31/2026                                    | Y 10/23/24     |  |  |
|   |  |  |   | 138219                                       | Υ              |  |  |
| Farfan  | Pilar  | 1063915718   | Associate Marriage and Family Therapist   | 3/31/2026                                    | 4/11/2024      |  |  |
|   |  |  |   | 106024                                       | Υ              |  |  |
| Pamilton  | Raynard  | 1720880230   | Associate Clinical Social Worker  | 12/31/2025                                   | 4/11/2025      |  |  |
|   |  |  |   | 12474  |                |  |  |
| Trahan  Program Name  | Roslyn   | 1639839608   | Licensed Professional Clinical Counselor alties/Modalities Program Provides: Case Ma  |  | Y 10/31/23     |  |  |
| Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202 Phone Number: (209) 468-8686 Lingustic capabilities: Interpreter services are available for languages other than English. |  | Telehealth Services Provided: Yes Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A |   |  |                |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New  | Members: Yes  dren's Health Insurance Program (CHIP) Men  | nbers? N/A                                   |                |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New Accepting Chil Populations se  | Members: Yes  dren's Health Insurance Program (CHIP) Men  rved: Children/Youth and Adults.  |  | , Bisexual,    |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New Accepting Chil Populations se  | dren's Health Insurance Program (CHIP) Men rved: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You  |  | /, Bisexual,   |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New Accepting Chil Populations se Cultural Abilitie  | dren's Health Insurance Program (CHIP) Menroed: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You   |  | /, Bisexual,   |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 0                                  | dren's Health Insurance Program (CHIP) Menroed: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You   |  | /, Bisexual,   |  |  |
| City: Stockton,<br>Phone Numb<br>Lingustic capa<br>Interpreter serv<br>for languages of   | CA 95202<br>er:(209) 468-8686<br>abilities:<br>vices are available                                   | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 0                                  | dren's Health Insurance Program (CHIP) Men rved: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You Open 24 Hours.   |  | CC and         |  |  |
| City: Stockton, Phone Numb Lingustic capa Interpreter serv for languages of   | CA 95202 er:(209) 468-8686 abilities: vices are available other than English.                        | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: ( website: https://                | dren's Health Insurance Program (CHIP) Menored: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age Youth Open 24 Hours. www.sjcbhs.org/crisis_intervention.aspx  | uth, Lesbian, Gay                            | CC and         |  |  |
| City: Stockton, Phone Numb Lingustic capa Interpreter serv for languages of   | CA 95202 er:(209) 468-8686 abilities: vices are available other than English.                        | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: ( website: https://                | dren's Health Insurance Program (CHIP) Menored: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age Youth Open 24 Hours. www.sjcbhs.org/crisis_intervention.aspx  | uth, Lesbian, Gay License # and Exp Date     | CC and         |  |  |
| City: Stockton, Phone Numb Lingustic capa Interpreter serv for languages of   | CA 95202 er:(209) 468-8686 abilities: vices are available other than English.  First Name            | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: ( website: https://                | dren's Health Insurance Program (CHIP) Menred: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You Open 24 Hours. www.sjcbhs.org/crisis_intervention.aspx  Type of License                                  | License # and Exp Date 37033                 | CC and<br>Date |  |  |
| City: Stockton, Phone Numb Lingustic capa Interpreter serv for languages of   | CA 95202 er:(209) 468-8686 abilities: vices are available other than English.  First Name            | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: ( website: https://                | dren's Health Insurance Program (CHIP) Menred: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You Open 24 Hours. www.sjcbhs.org/crisis_intervention.aspx  Type of License                                  | License # and Exp Date 37033 8/31/2026       | CC and<br>Date |  |  |
| City: Stockton, Phone Numb Lingustic capa Interpreter serv for languages of   | CA 95202 er:(209) 468-8686 abilities: vices are available other than English.  First Name  Stephanie | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: ( website: https:// NPI 1659798130 | dren's Health Insurance Program (CHIP) Menred: Children/Youth and Adults. es: Veterans, Older Adults, Transitional Age You Open 24 Hours. www.sjcbhs.org/crisis_intervention.aspx  Type of License  Licensed Psychiatric Technician | License # and Exp Date 37033 8/31/2026 34426 | CC and<br>Date |  |  |

| Patricia<br>Melissa | 1790058352  | Licensed Marriage and Family Therapist   | 8/31/2026  | Υ   |
|---------------------|---|--|--|---|
| Melissa             | 4072044073  | , , , , , , , , , , , , , , , , , , ,  |  |   |
| Melissa             | 4072044070  |  | 36496  |   |
|                     | 1972944072  | Licensed Psychiatric Technician  | 11/30/2025   | Υ   |
|                     |   | ·  | 40284  |   |
| Jeff                | 1043753478  | Licensed Psychiatric Technician  | 2/28/2026  | Υ   |
|                     |   |  | 136866   |   |
| Jenna               | 1437658408  | Licensed Marriage and Family Therapist   | 12/31/2026   | Υ   |
|                     |   |  | 53691  |   |
| Carmencita          | 1821298753  | Licensed Marriage and Family Therapist   | 9/30/2026  | Υ   |
|                     |   |  | 34221  |   |
| Carolyn             | 1861650228  | Licensed Psychiatric Technician  | 9/30/2026  | Υ   |
|                     |   |  | 98897  |   |
| Roy                 | 1407229248  | Associate Clinical Social Worker   | 12/31/2025   | Υ   |
|                     |   |  | 102315   |   |
| Carlos              | 1306193933  | Licensed Marriage and Family Therapist   | 1/31/2027  | Υ   |
|                     |   |  | 118171   |   |
| Frank               | 1992179352  | Associate Marriage and Family Therapist  | 2/28/2026  | Υ   |
|                     |   |  | 34942  |   |
| Sandeep             | 1871852673  | Licensed Psychiatric Technician  | 10/31/2026   | Υ   |
|                     |   |  | 129416   |   |
| Omar                | 1558832712  | Licensed   | 3/31/2027  | Υ   |
|                     |   |  | 38233  |   |
| Loni                | 1891145033  | Licensed Psychiatric Technician  | 6/30/2027  | Υ   |
|                     |   |  | 99975  |   |
| Shauna              | 1841798865  | Licensed Clinical Social Worker  | 2/28/2027  | Υ   |
|                     |   |  | 106905   |   |
| Brenda              | 1821477035  | Licensed Marriage and Family Therapist   | 6/30/2026  | Υ   |
|                     |   |  | 36471  |   |
| Milagros            | 1477809929  | Licensed Psychiatric Technician  | 2/28/2026  | Υ   |
|                     |   |  | 37534  |   |
| Victoria            | 1487074258  | Licensed Psychiatric Technician  | 7/31/2027  | Υ   |
|                     |   |  | 6643   |   |
| Angie               | 1891220729  | Associate Professional Clinical Counselor  | 7/31/2025  | Υ   |
|                     |   |  |  |   |
| Sonva               | 1497878482  | Licensed Marriage and Family Therapist   |  | Υ   |
|                     | 2-37070-02  | Licensed Marriage and Farming Therapist  |  |   |
| Leonardo            | 1962822643  | Licensed Clinical Social Worker  |  | Υ   |
| LCOHAIGO            | 1502022045  | Licensed chinear social worker   |  |   |
| Wendy               | 1265554638  | Licensed Marriage and Family Therapist   |  | Υ   |
| **Citay             | 1203334030  | Licensed Marriage and Farming Therapist  | 2,31,2020  |   |
|                     |   |  | CO56670518   |   |
| Kellie              | 1609248368  | Substance Abuse Counselor II   |  | Υ   |
|                     | Carmencita Carolyn Roy Carlos Frank Sandeep Omar Loni Shauna Brenda Milagros Victoria | Carmencita 1821298753  Carolyn 1861650228  Roy 1407229248  Carlos 1306193933  Frank 1992179352  Candeep 1871852673  Comar 1558832712  Coni 1891145033  Chauna 1841798865  Carolyn 1477809929  Victoria 1487074258  Angie 1891220729  Conya 1497878482  Leonardo 1962822643  Wendy 1265554638 | Carmencita 1821298753 Licensed Marriage and Family Therapist Licensed Psychiatric Technician  1809 1407229248 Associate Clinical Social Worker  1306193933 Licensed Marriage and Family Therapist  1992179352 Associate Marriage and Family Therapist  1871852673 Licensed Psychiatric Technician  1871852673 Licensed Psychiatric Technician  1891145033 Licensed Psychiatric Technician  1891145033 Licensed Psychiatric Technician  1841798865 Licensed Clinical Social Worker  18780929 Licensed Marriage and Family Therapist  1477809929 Licensed Psychiatric Technician  1487074258 Licensed Psychiatric Technician  1487074258 Licensed Psychiatric Technician  1497878482 Licensed Psychiatric Technician  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Clinical Social Worker  1497878482 Licensed Clinical Social Worker  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Clinical Social Worker  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Clinical Social Worker  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Marriage and Family Therapist  1497878482 Licensed Marriage and Family Therapist | Same   Same |

|  |              | _   |   |                           |                |
|--|--------------|---|---|---------------------------|----------------|
|  |              |   |   | 41710                     |                |
| Phillips   | Heather      | 114530250   | Licensed Psychatric Technician          | 1/31/2026                 | Υ              |
|  |              |   |   | 40662                     |                |
| Price  | Jennifer     | 1932621893  | Licensed Psychiatric Technician         | 12/31/2026                | Υ              |
|  |              |   |   | 42150                     |                |
| Scharp   | Sam          | 1508526856  | Licensed Psychiatric Technician         | 6/30/2027                 | Υ              |
|  |              |   |   | 41696                     |                |
| Sumampong  | Criselle     | 1073121414  | Licensed Psychiatric Technician         | 12/31/2025                | Υ              |
|  |              |   |   | 124868                    |                |
| Tabinas  | Vianny Gieng | 1770204679  | Associate Clinical Social Worker        | 8/31/2025                 | Υ              |
|  |              |   |   | 44225                     |                |
| Teague   | Catherine    | 1073729646  | Licensed Marriage and Family Therapist  | 3/31/2026                 | Υ              |
|  |              |   |   | 102953                    |                |
| Valenzuela   | Maira        | 1093221087  | Associate Clinical Social Worker        | 8/31/2025                 | Υ              |
|  |              |   |   | 131513                    |                |
| Walsh  | Peter        | 1134570542  | Associate Marriage and Family Therapist | 3/31/2026                 | Υ              |
| Street City: Stockton, CA 95202 Phone Number:(209) 468-8686 Lingustic capabilities: Interpreter services are available for languages other than English. |              | Accepting New Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 0 |   |                           | , Bisexual,    |
|  |              |   |   |                           |                |
| Last Name  | First Name   | NPI   | Type of License                         | License #<br>and Exp Date | CC and<br>Date |
|  |              |   | 1                                       | 37033                     |                |
| Alejo  | Stephanie    | 1659798130  | Licensed Psychiatric Technician         | 8/31/2026                 | Υ              |
|  |              |   | ,                                       | 34426                     |                |
| Arriola  | Eulalie      | 1255573044  | Licensed Psychiatric Technician         | 1/31/2026                 | Υ              |
|  | =======      |   |   | 120140                    | •              |
| 1  |              |   |   |                           |                |
| Avelar   | Natalie      | 1801524657  | Associate Clinical Social Worker        | 12/31/2025                | Υ              |

|             |             |            |   | 108455              |   |
|-------------|-------------|------------|---|---------------------|---|
| Ballesteros | Patricia    | 1790058352 | Licensed Marriage and Family Therapist    | 8/31/2025           | Υ |
|             |             |            | , , , , , , ,                             | 40284               |   |
| Bareng      | Jeff        | 1043753478 | Licensed Psychiatric Technician           | 2/28/2026           | Υ |
|             |             |            | ,   | 36496               |   |
| Bazua       | Melissa     | 1972944072 | Licensed Psychiatric Technician           | 11/30/25            | Υ |
|             |             |            | ,   | 136866              |   |
| Blewett     | Jenna       | 1437658408 | Licensed Marriage and Family Therapist    | 12/31/2026          | Υ |
|             |             |            |   | 53691               |   |
| Bringas     | Carmencita  | 1821298753 | Licensed Marriage and Family Therapist    | 9/30/2026           | Υ |
|             |             |            |   | 34221               |   |
| DeJesus     | Carolyn     | 1861650228 | Licensed Psychiatric Technician           | 9/30/2026           | Υ |
|             |             |            |   | 98897               |   |
| Douglas     | Roy         | 1407229248 | Associate Clinical Social Worker          | 12/31/2025          | Υ |
|             |             |            |   | 102315              |   |
| Figueroa    | Carlos      | 1306193933 | Licensed Marriage and Family Therapist    | 1/31/2027           | Υ |
|             |             |            |   | 118171              |   |
| Garcia      | Frank       | 1992179352 | Associate Marriage and Family Therapist   | 2/28/2026           | Υ |
|             |             |            |   | A49224              |   |
| Gill        | Paramijit   | 1073629218 | Physician                                 | 9/30/2026           | Υ |
|             |             |            |   | 34942               |   |
| Gill        | Sandeep     | 1871852673 | Licensed Psychiatric Technician           | 10/31/2026          | Υ |
|             |             |            |   | G70479              |   |
| Graff       | Robert      | 1366560112 | Physician                                 | 8/31/2026           | Υ |
|             |             |            |   | 129416              |   |
| Guzman      | Omar        | 158832712  | Licensed Clinical Social Worker           | 3/31/2027           | Υ |
|             |             |            |   | 38233               |   |
| Isham       | Loni        | 1891145033 | Licensed Psychiatric Technician           | 6/30/2027           | Υ |
|             |             | 101170005  |   | 99975               | W |
| Ketcham     | Shauna      | 1841798865 | Licensed Clinical Social Worker           | 2/28/2027           | Υ |
| Vb o um r   | Fric        | 1072555274 | Physician                                 | G86109              | N |
| Khoury      | Eric        | 1972555274 | Physician                                 | 4/30/2027           | N |
| Lowis       | Chandra     | 1770914061 | Licensed Developtric Technician           | 37210<br>6/30/2027  | Υ |
| Lewis       | Chandra     | 1770914061 | Licensed Psychiatric Technician           | -                   | T |
| Lowman      | Pronds      | 1821477035 | Licensed Marriage and Family Therapist    | 106905<br>6/30/2026 | Υ |
| Lewman      | Brenda      | 10214//035 | Licensed Marriage and Family Therapist    | 36471               | Ī |
| McArthur    | Milagros    | 1477809929 | Licensed Developeric Technician           | 2/28/2026           | Υ |
| ivicartiul  | Iviliagi US | 14//003323 | Licensed Psychiatric Technician           | 6643                | ī |
| Melgarojo   | Angie       | 1891220729 | Associate Professional Clinical Counselor | 7/31/2025           | Υ |
| Melgarejo   | Angie       | 1031220729 | Associate Froressional Chilical Counselor | 37534               | I |
| Menius      | Victoria    | 1487074258 | Licensed Psychiatric Technician           | 7/31/2027           | Υ |
| iviellius   | VICTOLIA    | 140/0/4238 | Licensed Esychiatric Technician           | 1/31/2021           | I |

|                     |                   |  |  | 109801              |          |  |
|---------------------|-------------------|--|--|---------------------|----------|--|
| Molina Eliab        | Sonya             | 1497878482   | Licensed Marriage and Family Therapist           | 10/31/2026          | Υ        |  |
|                     | 1                 |  | , ,  | 100000              |          |  |
| Morales             | Leonardo          | 1962822643   | Licensed Clinical Social Worker                  | 2/28/2027           | Υ        |  |
|                     |                   |  |  | 84045               |          |  |
| Myotte              | Wendy             | 1265554638   | Licensed Marriage and Family Therapist           | 1/31/2026           | Υ        |  |
|                     |                   |  |  | CO56670518          |          |  |
| Pate                | Kellie            | 1609248368   | Substance Abuse Counselor II                     |                     | Υ        |  |
| rate                | Keille            | 1009246506   | Substance Abuse Counselor II                     | 11/18/2025<br>41710 | I        |  |
| Phillips            | Heather           | 114530250  | Licensed Dayshiatric Technician                  | 1/31/2026           | Υ        |  |
| riiiiips            | Пеашег            | 114550250  | Licensed Psychiatric Technician                  | 40662               | ı        |  |
| Price               | Jennifer          | 1932621893   | Licensed Psychiatric Technician                  | 12/31/2026          | Υ        |  |
| rice                | Jenninei          | 1932021893   | Licensed Esychiatric rechnician                  | 42150               | <u> </u> |  |
| Scharp              | Sam               | 1508526856   | Licensed Psychiatric Technician                  | 6/30/2027           | Υ        |  |
| <u>Scriai p</u>     | Jaili             | 1308320830   | Licenseu r sychiatric rechinician                | 41696               | <u>'</u> |  |
| Sumampong           | Criselle          | 1073121414   | Licensed Psychiatric Technician                  | 12/31/2025          | Υ        |  |
| Jumampong           | Crisciic          | 10/3121414   | Licenseu i syematrie reenmetan                   | 124868              | <u>'</u> |  |
| Tabinas             | Vianny Gieng      | 1770204679   | Associate Clinical Social Worker                 | 8/31/2025           | Υ        |  |
| Tabillas            | Viaility Gictig   | 1770204073   | Associate cliffical social Worker                | 44225               | <u>'</u> |  |
| Teague              | Catherine         | 1073729646   | Licensed Marriage and Family Therapist           | 3/31/2026           | Υ        |  |
| Тейвис              | Catricrine        | 1073723040   | Electised Marriage and Farminy Therapist         | G185940             | '        |  |
| Tupper              | Charles           | 1700944121   | Physician  | 5/31/2027           | Υ        |  |
| Тиррег              | Charles           | 1700544121   | Titysician                                       | 102953              | '        |  |
| Valenzuela          | Maira             | 1093221087   | Associate Clinical Social Worker                 | 8/31/2025           | Υ        |  |
| <u> </u>            | - Ivian a         | 1030222007   | A second common second werker                    | 131513              | •        |  |
| Walsh               | Peter             | 1134570542   | Associate Marriage and Family Therapist          | 3/31/2026           | Υ        |  |
| Program Name:       |                   |  | alties/Modalities Program Provides: 24 hour      | · · ·               |          |  |
| Stabilization Unit  |                   | _  | Resources and referrals are provided during a    |                     |          |  |
| Type of Program     | ,                 |  | <b>3</b> ·                                       |                     |          |  |
| Address: 1212 N     |                   |  |  |                     |          |  |
| Street              |                   |  |  |                     |          |  |
| City: Stockton, C   | CA 95202          |  |  |                     |          |  |
| Phone Number:       | (209) 468-8686    | Telehealth Serv  | vices Provided: Yes                              |                     |          |  |
| Lingustic capab     | oilities:         | Accepting New  | Members: Yes                                     |                     |          |  |
| Interpreter service | es are available  |  |  |                     |          |  |
| for languages oth   | her than English. |  |  |                     |          |  |
| Ġ.                  |                   | Accepting Children's Health Insurance Program (CHIP) Members? No |  |                     |          |  |
| <u> </u>            |                   |  | rved: Children/Youth and Adults.                 |                     |          |  |
|                     |                   |  | es: Veterans, Older Adults, and Transitional Age | Youth.              |          |  |
|                     |                   | Office Hours: 0  | <u>_</u>   |                     |          |  |
|                     |                   |  |  |                     |          |  |

| Last Name | First Name | NPI        | Type of License                         | License #  | CC and<br>Date |
|-----------|------------|------------|---|------------|----------------|
|           |            |            | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 42243      |                |
| Andrade   | Oscar      | 1215661145 | Licensed Psychiatric Technician         | 10/31/2025 | Υ              |
|           | Maria      |            | ,                                       | 488617     |                |
| Arroyo    | Elizabeth  | 1255459061 | Registered Nurse                        | 5/31/2026  | Υ              |
|           |            |            |   | 40284      |                |
| Bareng    | Jeff       | 1043753478 | Licensed Psychiatric Technician         | 2/28/2026  | Υ              |
|           |            |            |   | 32628      |                |
| Bokelman  | Roy        | 11404003   | Licensed Psychiatric Technician         | 9/30/2026  | Υ              |
|           |            |            |   | 713008     |                |
| Brown     | Brandi     | 1316060023 | Registered Nurse                        | 1/31/2027  | Υ              |
|           |            |            |   | 565185     |                |
| Cabrera   | Gilbert    | 1679693766 | Registered Nurse                        | 8/31/2025  | Υ              |
|           |            |            |   | 42379      |                |
| Chavez    | Justin     | 1396479606 | Licensed Psychiatric Technician         | 9/30/2026  | Υ              |
|           |            |            |   | 41990      |                |
| Daniel    | Steven     | 1184366528 | Licensed Psychiatric Technician         | 1/31/2027  | Υ              |
|           |            |            |   | 824521     |                |
| Dapon     | Jeanette   | 1780152918 | Registered Nurse                        | 2/28/2026  | Υ              |
|           |            |            |   | 34221      |                |
| DeJesus   | Carolyn    | 1861650228 | Licensed Psychiatric Technician         | 10/31/2025 | Υ              |
|           | Francisco  |            |   | 42266      |                |
| Garcia    | Francisco  | 1538899620 | Licensed Psychiatric Technician         | 11/30/2026 | Υ              |
|           |            |            |   | G70479     |                |
| Graff     | Robert     | 1366560112 | Physician                               | 8/31/2026  | Υ              |
|           |            |            |   | 33714      |                |
| Hardy     | Denise     | 1912202813 | Licensed Psychiatric Technician         | 1/31/2027  | Υ              |
|           |            |            |   | 93110      |                |
| Hawkins   | Lynnetta   | 1437436938 | Licensed Marriage and Family Therapist  | 7/31/2027  | Υ              |
| Holmes    | Sherronya  | 1205214228 | Licensed Psychiatric Technician         | 37605      | Υ              |
|           |            |            |   | 41886      |                |
| Kaur      | Narinder   | 1063006294 | Licensed Psychiatric Technician         | 6/30/2026  | Υ              |
|           |            |            |   | G86109     |                |
| Khoury    | Eric       | 1972555274 | Physician                               | 4/30/2027  | N              |
|           |            |            |   | 198957     |                |
| Kottke    | Marline    | 1891223111 | Licensed Vocational Nurse               | 5/31/2027  | Υ              |
|           |            |            |   | 764452     |                |
| Laizer    | Gloria     | 1255706479 | Registered Nurse                        | 7/31/2027  | Υ              |
|           |            |            |   | 103862     |                |
| Lambert   | Rekha      | 1164647525 | Licensed Marriage and Family Therapist  | 9/30/2025  | Υ              |

|            |          |             |  | 27240      |          |
|------------|----------|-------------|--|------------|----------|
| Lowis      | Chandra  | 1770914061  | Licensed Daychiatric Technician          | 37210      | Υ        |
| Lewis      | Chandra  | 1770914061  | Licensed Psychiatric Technician          | 6/30/2027  | Y        |
| t to the   | Claude I | 4.407070705 |  | 28731      | V        |
| Little     | Christy  | 1497978795  | Licensed Psychiatric Technician          | 7/31/2027  | Υ        |
|            |          |             |  | 42402      |          |
| Lo         | Muacong  | 1689300857  | Licensed Psychiatric Technician          | 12/31/2025 | Υ        |
|            |          |             |  | 41128      |          |
| Lo         | Pa       | 1295377117  | Licensed Psychiatric Technician          | 3/31/2026  | Υ        |
|            |          |             |  | 139560     |          |
| Maldonado  | Adan     | 1063878825  | Licensed Marriage and Family Therapist   | 5/31/2027  | Υ        |
|            |          |             |  | 42399      |          |
| Martin     | Kaitlyn  | 1548959802  | Licensed Psychiatric Technician          | 8/31/2026  | Υ        |
|            |          |             |  | 797022     |          |
| Mendoza    | Michelle | 1477951812  | Registered Nurse                         | 10/31/2026 | Υ        |
|            |          |             |  | 29086      |          |
| Michael    | Kimberly | 1538831151  | Licensed Psychiatric Technician          | 7/31/2026  | Υ        |
|            |          |             |  | 38249      |          |
| Mocko      | James    | 1558726224  | Licensed Psychiatric Technician          | 1/31/2027  | Υ        |
|            |          |             |  | 146645     |          |
| Montantes  | Michael  | 1780018390  | Associate Marriage and Family Therapist  | 4/30/2026  | Υ        |
|            |          |             |  | 91433      |          |
| Navarro    | Grace    | 1083737753  | Licensed Clinical Social Worker          | 8/31/2025  | Υ        |
|            |          |             |  | 88176      |          |
| Nguyen     | Thao     | 1912214065  | Licensed Marriage and Family Therapist   | 10/31/2026 | Υ        |
|            |          |             |  | 2720       |          |
| Nguyen     | Thao     | 1912214065  | Licensed Professional Clinical Counselor | 10/31/2025 | Υ        |
|            |          |             |  | CO56670518 |          |
| Pate       | Kellie   | 1609248368  | Substance Abuse Counselor II             | 11/18/2025 | Υ        |
|            |          |             |  | 29213      |          |
| Rios       | Teri     | 1942323829  | Licensed Psychiatric Technician          | 2/28/2026  | Υ        |
|            |          |             | ,  | 831415     |          |
| Sahota     | Mandeep  | 1609536994  | Registered Nurse                         | 11/3/2026  | Υ        |
|            |          |             | 3  | 41462      | <u> </u> |
| Salon      | Jennifer | 1730702119  | Licensed Psychiatric Technician          | 4/30/2027  | Υ        |
|            |          | 1.33,32113  |  | 547944     | •        |
| Seraypheap | Arunny   | 1013037274  | Registered Nurse                         | 8/31/2026  | Υ        |
| , pcup     | ,        | 10000,2, 1  |  | 30936      | •        |
| Sesante    | Maria    | 1851515720  | Licensed Psychiatric Technician          | 8/31/2026  | Υ        |
| Jesante    | Iviaria  | 1031313720  | Licensed i Sychiatric recinician         | 95297276   | 1        |
| Singh      | lacyir   | 1477022011  | Pagistared Nurse                         |            | V        |
| Singh      | Jasvir   | 1477833911  | Registered Nurse                         | 1/31/2026  | Y        |
| IC: 4 h    | la ma    | 1052444662  | United By district To 1.11               | 42177      | V        |
| Smith      | Jerry    | 1952111668  | Licensed Psychiatric Technician          | 3/31/2027  | Υ        |

| Program Nam | ne: Forensic Cour | Services/Speci | ialties/Modalities Program Provides:Case Ma | nagement/ Broke       | rage Mental |
|-------------|-------------------|----------------|---|-----------------------|-------------|
| Freeman     | Cody              | 1538584859     | Licensed Psychiatric Technician             | 11/30/2025            | Υ           |
| Wright-     |                   |                |   | 37819                 |             |
| Winck       | Angela            | 1083002992     | Registered Nurse                            | 701021<br>9/30/2026   | Υ           |
| Warfield    | Gena              | 1578928974     | Associate Clinical Social Worker            | 2/28/2025             | Υ           |
|             |                   |                |   | 120885                |             |
| Walter      | Taffie            | 1134570542     | Licensed Psychiatric Technician             | 32090<br>7/31/2027    | Υ           |
| Villasenor  | Kendra            | 1447518204     | Licensed Psychiatric Technician             | 36449<br>11/30/2025   | Υ           |
| Varquez     | Sharon            | 1366682387     | Licensed Psychiatric Technician             | 11/30/2025            | Υ           |
| Vang        | Mai               | 1982103081     | Licensed Psychiatric Technician             | 12/31/2026<br>34435   | Υ           |
| Таррсі      | Citatics          | 1700577121     | 1 Trysician                                 | 40697                 | '           |
| Tupper      | Charles           | 1700944121     | Physician                                   | G185940<br>5/31/2027  | Y           |
| Tuning      | Frankie           | 1073631727     | Registered Nurse                            | 95171895<br>3/31/2026 | Υ           |
| Tran        | Michelle          | 1366642068     | Licensed Clinical Social Worker             | 81278<br>6/30/2027    | Υ           |
| Stephens    | Julie             | 1376678722     | Associate Professional Clinical Counselor   | 12831<br>12/31/2025   | Υ           |
| Stephens    | Julie             | 1376678722     | Licensed Marriage and Family Therapist      | 155636<br>6/30/2027   | Υ           |
| Smith       | Maria             | 1821624156     | Licensed Psychiatric Technician             | 41522<br>2/28/2027    | Υ           |

**Program Name:** Forensic Court Full Service Partnership (MHSA) #9091

Type of Program: MH

Address: 1212 N California

Street

Ġ

City: Stockton, CA 95202

Phone Number: (209) 468-8786

Lingustic capabilities:

Interpreter services are available for languages other than English.

**Services/Specialties/Modalities Program Provides:**Case Management/ Brokerage,Mental Health Services, Medication Support, and Crisis Intervention.

Telehealth Services Provided: No

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? No

Populations served: Adults.

Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual,

or Transgender.

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

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

|   | 1          | 1   | 1   | 1                         |                |  |  |
|---|------------|---|---|---------------------------|----------------|--|--|
|   |            |   |   | License #                 | CC and         |  |  |
| Last Name   | First Name | NPI   | Type of License                           | and Exp Date              | Date           |  |  |
|   |            |   |   | 108163                    |                |  |  |
| Garcia  | Julio      | 1679961106  | Licensed Marriage and Family Therapist    | 8/31/2026                 | Υ              |  |  |
|   |            |   |   | 154626                    |                |  |  |
| Regalado  | Berenice   | 1376027656  | Licensed Marriage and Family Therapist    | 4/30/2027                 | Υ              |  |  |
| Resendez-   |            |   |   | 14224                     |                |  |  |
| Rodriguez   | Jasmine    | 1326542879  | Associate Professional Clinical Counselor | 7/31/2026                 | Υ              |  |  |
|   |            |   |   | 154455                    |                |  |  |
| Sahota  | Kuljit     | 1619555836  | Associate Marriage and Family Therapist   | 4/30/2026                 | Υ              |  |  |
| 75/23) Full Service Partnership (MHSA) #9093  Type of Program: MH Address: 1212 N California Street City: Stockton, CA 95202 Phone Number:(209) 468-3760 Lingustic capabilities: Interpreter services are available for languages other than English. |            | Accepting New   |   |                           |                |  |  |
| Ŀ   |            | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |   |                           |                |  |  |
|   |            | Populations served: Adults.   |   |                           |                |  |  |
|   |            | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. |   |                           |                |  |  |
|   |            | Office Hours: Monday - Friday 8:00 am- 5:00 pm                                      |   |                           |                |  |  |
|   |            | website: https://   | /www.sjcbhs.org/adult.aspx<br>T           | I                         |                |  |  |
| Last Name   | First Name | NPI   | Type of License                           | License #<br>and Exp Date | CC and<br>Date |  |  |
|   |            |   |   | 81785                     | - 1- 1         |  |  |
| Chukwuka  | Ogiram     | 1063662781  | Licensed Clinical Social Worker           | 10/31/2025                | Y 10/25/23     |  |  |
|   |            | 4444764000  |   | 156232                    | Υ              |  |  |
| Cowan   | Nicole     | 1144764390  | Licensed Marriage and Family Therapist    | 7/31/2027                 | 6/30/2025      |  |  |
| مامینی  | Charring   | 1710420277  | Registered Nurse                          | 1606121                   | V 2 /4 /2025   |  |  |
| Holguin   | Shawna     | 1710420377  | Registered Nurse                          | 1606131<br>32050          | Y 3/4/2025     |  |  |
| House   | Tracy      | 1720503550  | Licensed Psychiatric Technician           | 8/31/2025                 | Y 2/1/2020     |  |  |
| TIOUSE  | Пасу       | 1720303330  | Licenseu rsychiatric recililician         | 117056                    | Υ 2/1/2020     |  |  |
| Kelly   | Tracy      | 1508510033  | Associate Clinical Social Worker          | 8/31/2026                 | 7/28/2025      |  |  |
| INCHY   | Пасу       | 1200210022  | A330Clate Cliffical 30Claf WOLKET         | A84098                    | 772072023      |  |  |
| Resendez  | Cynthia    | 1780877845  | Physician                                 | 7/31/2027                 | Y 1/1/2019     |  |  |
| cscriacz  | Cyntina    | 1-7000770-0   | 1. 11,5101011                             | 1,131,2021                | . 1,1,2013     |  |  |

| <u> </u>                          | T                | 1  | T   | 125682               | V              |  |  |
|-----------------------------------|------------------|--|---|----------------------|----------------|--|--|
| Wilson                            | Tia              | 1396435293                                 | Associate Clinical Social Worker                      | 9/30/2026            | 7/28/2025      |  |  |
| Program Name:                     |                  |  | alties/Modalities Program Provides: Provides          |                      |                |  |  |
| Services #39BE                    | riousing         | -  | age/linkage, individual rehabilitation services for   | _                    |                |  |  |
| Type of Program                   | n: MH            | _  | embers have access to individual therapy, group       |                      |                |  |  |
| Address: 1212 N                   |                  | services.                                  | misoro navo acceso to marriada ancrapy, group         | thorapy, and po      | yornatiy       |  |  |
| Street                            | · Gamorria       |  |   |                      |                |  |  |
| City: Stockton, C.                | A 95202          |  |   |                      |                |  |  |
| Phone Number:(                    |                  | Telehealth Serv                            | rices Provided: Yes                                   |                      |                |  |  |
| Lingustic capab                   | •                | Accepting New                              | Members: Yes  |                      |                |  |  |
| Interpreter service               |                  |  |   |                      |                |  |  |
| for languages oth                 | er than English. |  |   |                      |                |  |  |
| Ė.                                |                  | Accepting Child                            | dren's Health Insurance Program (CHIP) Men            | nbers? N/A           |                |  |  |
| <u></u>                           |                  | Populations ser                            | rved: Adults.   |                      |                |  |  |
|                                   |                  | <b>Cultural Abilitie</b>                   | s: Veterans, Older Adults, Transitional Age Yo        | uth, Lesbian, Gay    | , Bisexual,    |  |  |
|                                   |                  | or Transgender.                            |   |                      |                |  |  |
|                                   |                  | Office Hours: M                            | londay - Friday 8:00 am- 5:00 pm                      |                      |                |  |  |
|                                   |                  | website: https://www.sjcbhs.org/adult.aspx |   |                      |                |  |  |
|                                   |                  |  |   |                      |                |  |  |
|                                   |                  |  |   | License #            | CC and         |  |  |
| Last Name                         | First Name       | NPI  | Type of License                                       | and Exp Date         | Date           |  |  |
|                                   |                  |  |   | 152060               | Υ              |  |  |
| Gementera                         | Jalessa          | 1588134209                                 | Licensed Marriage and Family Therapist                | 12/31/2026           | 7/21/2025      |  |  |
|                                   |                  |  |   | 96641                | Υ              |  |  |
| Jackson                           | Sasha            | 1295181295                                 | Licensed Clinical Social Worker                       | 9/30/2026            | 7/30/2025      |  |  |
|                                   |                  |  |   | PT25868              |                |  |  |
| Mendez                            | Adeline          | 1255453353                                 | Licensed Psychiatric Technician                       | 1/31/2026            | Y 1/1/2018     |  |  |
|                                   |                  |  |   | 138441               | Υ              |  |  |
| Murray                            | Karen            | 1346735917                                 | Associate Marriage and Family Therpist                | 3/31/2027            | 5/20/2020      |  |  |
| Divors                            | Lilian           | 1750050424                                 | Licensed Clinical Casial Warden                       | 102359               | 1/10/2025      |  |  |
| Rivera                            | Lilian           | 1750059424                                 | Licensed Clinical Social Worker                       | 7/31/2027<br>127280  | 1/10/2025<br>Y |  |  |
| Washington                        | Lorraine         | 1639722820                                 | Associate Marriage and Family Therpist                | 8/31/2025            | 7/24/2025      |  |  |
| Program Name:                     |                  |  | alties/Modalities Program Provides: Provides          |                      |                |  |  |
| (MHSA) #39AN                      | IIIOF IIAL       | -  | erely mentally ill adults with history of justice inv |                      | •              |  |  |
| Type of Program                   | n: MH            |  | members referred by the court via petition pure       | •                    |                |  |  |
| Address: 1212 N                   |                  | . 31 331 11003 101                         |   | Judini to tho of the | _ 401.         |  |  |
| Street                            |                  |  |   |                      |                |  |  |
| City: Stockton, C.                | A 95202          |  |   |                      |                |  |  |
| Phone Number:(                    |                  | Telehealth Serv                            | rices Provided: No                                    |                      |                |  |  |
| Lingustic capabi                  | •                | Accepting New                              | Members: Yes  |                      |                |  |  |
| Interpreter service               |                  |  |   |                      |                |  |  |
| <u>-</u>                          |                  |  |   |                      |                |  |  |
| for languages other than English. |                  |  |   |                      |                |  |  |

| <u>ė</u>   |   | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |  |  |                             |  |  |  |  |  |
|--|---|---|--|--|-----------------------------|--|--|--|--|--|
|  |   | Populations served: Adults.   |  |  |                             |  |  |  |  |  |
|  |   | Cultural Abilitie   | es: Veterans, Older Adults, Transitional Age You   | uth, Lesbian, Gay  | , Bisexual,                 |  |  |  |  |  |
|  |   | or Transgender.   |  |  |                             |  |  |  |  |  |
|  |   | Office Hours: N   | 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 #<br>and Exp Date                                  | CC and<br>Date              |  |  |  |  |  |
| _  |   | 1000011050  |  | 46467  |                             |  |  |  |  |  |
| Brown  | Monique   | 1962641050  | Licensed Marriage and Family Therapist   | 7/31/2026  | N                           |  |  |  |  |  |
| Campos-  |   |   |  | 86636  | · · - /- /o o o -           |  |  |  |  |  |
| Martinez   | Elizabeth   | 1912603531  | Licensed Clinical Social Worker  | 11/30/2026   | Y 5/5/2025                  |  |  |  |  |  |
|  |   | 420624255   |  | 17103  | Υ                           |  |  |  |  |  |
| Galvan   | Abraham   | 1386349165  | Associate Professional Clinical Counselor  | 8/31/2026  | 7/22/2024                   |  |  |  |  |  |
|  |   |   |  | 149281   |                             |  |  |  |  |  |
|  |   |   | Associate Marriage and Family Therapist  | 8/31/2025  |                             |  |  |  |  |  |
| _  |   |   | and Associate Professional Clinical  | and 17593  | Υ                           |  |  |  |  |  |
| Johnson  Program Name  | Elizabeth   | 1730919010  | Counselor<br>alties/Modalities Program Provides: CBT, DB                                       | 9/30/2025  | 12/4/2024                   |  |  |  |  |  |
| (MHSA) #9092<br>Type of Progra<br>Address: 1212<br>City: Stockton, | N. California St.                                     |   |  |  |                             |  |  |  |  |  |
| Phone Number   | r:(209) 468-0476                                      | Telehealth Services Provided: Yes   |  |  |                             |  |  |  |  |  |
| for languages o  | bilities:<br>ices are available<br>ther than English. | Accepting New Members: Yes  |  |  |                             |  |  |  |  |  |
| Ė  |   |   | dren's Health Insurance Program (CHIP) Men   | nbers? No  |                             |  |  |  |  |  |
|  |   | •   |  |  | Populations served: Adults. |  |  |  |  |  |
|  |   | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. |  |  |                             |  |  |  |  |  |
|  |   | O(C: 11 )   |  |  | der.                        |  |  |  |  |  |
|  |   |   | londay - Friday 8:00 am- 5:00 pm   |  | der.                        |  |  |  |  |  |
|  |   |   |  | ı  | der.                        |  |  |  |  |  |
|  |   |   | londay - Friday 8:00 am- 5:00 pm   |  |                             |  |  |  |  |  |
|  | First Name  | website: https://   | Monday - Friday 8:00 am- 5:00 pm<br>/www.sjcbhs.org/adult.aspx                                 | License #  | CC and                      |  |  |  |  |  |
| Last Name  | First Name  |   | londay - Friday 8:00 am- 5:00 pm   | License #<br>and Exp Date                                  |                             |  |  |  |  |  |
|  |   | website: https://   | Monday - Friday 8:00 am- 5:00 pm /www.sjcbhs.org/adult.aspx  Type of License                   | License #<br>and Exp Date<br>723203                        | CC and<br>Date              |  |  |  |  |  |
| Last Name<br>Cruz  | First Name<br>Gloria                                  | website: https://   | Monday - Friday 8:00 am- 5:00 pm<br>/www.sjcbhs.org/adult.aspx                                 | License #<br>and Exp Date<br>723203<br>9/30/2027           | CC and<br>Date              |  |  |  |  |  |
| Cruz   | Gloria  | website: https://   | Monday - Friday 8:00 am- 5:00 pm /www.sjcbhs.org/adult.aspx  Type of License  Registered Nurse | License #<br>and Exp Date<br>723203<br>9/30/2027<br>352081 | CC and<br>Date<br>Y         |  |  |  |  |  |
|  |   | website: https://   | Monday - Friday 8:00 am- 5:00 pm /www.sjcbhs.org/adult.aspx  Type of License                   | License #<br>and Exp Date<br>723203<br>9/30/2027           | CC and<br>Date              |  |  |  |  |  |

|  |                |   |   | A84098                    |                |  |  |
|--|----------------|---|---|---------------------------|----------------|--|--|
| Resendez   | Cynthia        | 1780877845  | Physician                                   | 7/31/2027                 | Y 1/1/2019     |  |  |
| Program Name: Mary Graham<br>Children's Shelter #9008<br>Type of Program: MH<br>Address: 6861 Mary Graham<br>Lane<br>City: Stockton, CA 95231  |                | Services/Specialties/Modalities Program Provides: Case management/ brokerage including intensive care coordination (ICC), Mental Health Services including intensive home based services (IHBS), Medication Support, and Crisis intervention.   |   |                           |                |  |  |
| Phone Number:  | (209) 468-6966 |   | rices Provided: Yes                         |                           |                |  |  |
| Lingustic capabilities: Interpreter services are available for languages other than English.   |                | Accepting New Members: Yes  |   |                           |                |  |  |
| O.   |                | Accepting Child   | dren's Health Insurance Program (CHIP) Men  | nbers? Yes                |                |  |  |
|  |                |   | rved: Children/Youth.                       |                           |                |  |  |
|  |                |   | es: Lesbian, Gay, Bisexual, or Transgender. |                           |                |  |  |
|  |                | Office Hours: Monday - Friday 8:00 AM - 5:00 PM website: https://marygrahamfoundation.org/  |   |                           |                |  |  |
|  |                | website. https://i  | That ygrania moundation.org/                |                           |                |  |  |
| Last Name  | First Name     | NPI   | Type of License                             | License #<br>and Exp Date | CC and<br>Date |  |  |
|  |                |   |   | 131299                    |                |  |  |
| Agans  | Adrianna       | 1851831242  | Licensed Marriage and Family Therapist      | 2/28/2026                 | Y 2/1/2020     |  |  |
| Hall   | Tondra         | 177060152   | Associate Professional Clinical Counselor   | 13978<br>5/31/2026        | Y<br>7/11/2025 |  |  |
| Kumar  | Gaurav         | 1235513102  | Physician                                   | A151187<br>1/31/2027      | Y 11/16/23     |  |  |
| Washington   | Kerry          | 1689391997  | Registered Nurse                            | 559310<br>2/28/2027       | Y 7/2/2025     |  |  |
| Yocham   | Amanda         | 1326103516  | Licensed Marriage and Family Therapist      | 79068<br>2/28/2026        | Y 1/1/2018     |  |  |
| Program Name: MHSA TAY FSP #39B1 Type of Program: MH Address: 1212 N. California St. City: Stockton, CA 95202 Phone Number:(209) 468-2335 Lingustic capabilities: Interpreter services are available for languages other than English. |                | Services/Specialties/Modalities Program Provides: Medication, case management, rehabilitative services, group rehabilitation, group therapy, and individual therapy.  Telehealth Services Provided: Yes Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? No Populations served: Children/Youth and Adults. |   |                           |                |  |  |

|  |                  | Cultural Abilitie or Transgender. | s: Veterans, Older Adults, Transitional Age You   | ith, Lesbian, Gay         | , Bisexual,    |  |  |
|--|------------------|-----------------------------------|---|---------------------------|----------------|--|--|
|  |                  |                                   | Monday - Friday 8:00 am- 5:00 pm  |                           |                |  |  |
|  |                  |                                   | www.sjcbhs.org/index.aspx   |                           |                |  |  |
|  |                  | website: https://                 | www.sjobns.org/macx.aspx  | Π                         |                |  |  |
| Last Name  | First Name       | NPI                               | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |
|  |                  |                                   |   | 94485                     | Υ              |  |  |
| Ekpokai  | Tsola            | 1518603927                        | Associate Clinical Social Worker  | 3/31/2025                 | 7/23/2025      |  |  |
|  |                  |                                   |   | 53745                     | Υ              |  |  |
| Fullwood-Fleck   | Cynthia          | 1023247178                        | Licensed Marriage and Family Therapist  | 4/30/2027                 | 7/18/2025      |  |  |
|  |                  |                                   |   | 82456                     | Υ              |  |  |
| Saelee   | Cindy            | 1255511614                        | Licensed Clinical Social Worker   | 10/31/2025                | 7/25/2025      |  |  |
|  |                  |                                   |   | 130542                    |                |  |  |
| Schmidt  | Katarzyna        | 1285290346                        | Associate Marriage and Family Therapist   | 1/31/2026                 | Y 11/13/24     |  |  |
|  |                  |                                   |   | 14222                     | Υ              |  |  |
| Williams   | Showvon          | 1689133464                        | Associate Professional Clinical Counselor   | 7/31/2026                 | 7/29/2025      |  |  |
|  |                  |                                   |   | 18793                     | Υ              |  |  |
| Woodruff   | Latrice          | 1952790875                        | Associate Professional Clinical Counselor   | 2/28/2026                 | 7/23/2025      |  |  |
| Address:1212 N<br>City:Stockton, CA                            | A 95202          |                                   |   |                           |                |  |  |
| Phone Number:(   |                  | Telehealth Services Provided: Yes |   |                           |                |  |  |
| Lingustic capabi<br>Interpreter service<br>for languages other | es are available | Accepting New Members: Yes        |   |                           |                |  |  |
| Ŀ  |                  |                                   | Iren's Health Insurance Program (CHIP) Mem  | ibers? N/A                |                |  |  |
|  |                  | Populations ser                   |   |                           |                |  |  |
|  |                  |                                   | s: Older Adults, Lesbian, Gay, Bisexual, or Tran  | nsgender.                 |                |  |  |
|  |                  |                                   | Monday - Friday 8:00 am- 5:00 pm  |                           |                |  |  |
|  | Г                | website: https://                 | www.sjcbhs.org/older_adult.aspx   | Г                         |                |  |  |
| Last Name  | First Name       | NPI                               | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |
|  |                  |                                   |   | 117056                    | Υ              |  |  |
| Kelly  | Tracy            | 1508510033                        | Associate Clinical Social Worker  | 8/31/2026                 | 7/28/2025      |  |  |
| Wilson   | Tia              | 1396435293                        | Associate Clinical Social Worker  | 125682                    | Y<br>7/28/2025 |  |  |
| Program Name: Wellbeing #9020                                  | Pathways to      | -                                 | alties/Modalities Program Provides: Assessm<br>coordination, Intensive Home Based Services, P | •                         |                |  |  |

medication support. Type of Program: MH Address: 620 N. Aurora Street Ste 4 City: Stockton, CA 95202 Telehealth Services Provided: Yes Phone Number: (209) 468-2385 Lingustic capabilities: Accepting New Members: Yes Interpreter services are available for languages other than English. Accepting Children's Health Insurance Program (CHIP) Members? N/A Ġ Population Served: Children/Youth. Cultural Abilities: Transitional Age Youth. Monday - Friday 8:00 am - 5:00 pm Office Hours: website: https://www.sjcbhs.org/index.aspx License # CC and Last Name First Name NPI Type of License and Exp Date Date 105923 Shaukat 1821294455 10/31/2026 6/30/2024 Ansari Physician 101688 1154893683 Licensed Clinical Social Worker 5/31/2027 7/11/2025 Barajas Lauren 81226 Melissa 1467946301 Licensed Marriage and Family Therapist 2/28/2026 8/25/2025 Guerrero 117262 Rita Licensed Marriage and Family Therapist 1/31/2026 Herron 1659629285 7/22/2025 Hernandez 133517 8/31/2026 Estefania 1053011932 Associate Clinical Social Worker Y 9/3/2025 Luna 94571 Sheilena 1336437656 Licensed Marriage and Family Therapist 11/30/25 7/17/2025 Payne 10658 Pinon Karen 1518572320 Associate Professional Clinical Counselor 11/30/25 Y 5/7/2024 96813 Rivas-Olivares 9/30/2025 Yulisa 1801445085 Associate Clinical Social Worker 4/15/2024 Sneed Kasev 1083340186 Associate Marriage and Family Therapist 9/16/2025 128132 Wilkinson Lauren 1376145581 Associate Clinical Social Worker 1/31/2026 3/14/2025 Program Name: Peterson Hall Services/Specialties/Modalities Program Provides: Assessment, ICC/TCM, individual #9009 therapy, individual rehab, crisis intervention, and medication evaluation and support. Type of Program: MH Address: 535 W Matthews Rd City: French Camp, CA 95231 Phone Number: (209)468-4240 Telehealth Services Provided: Yes

| Lingustic capabilities: Interpreter services are available for languages other than English.    |  | Accepting New Members: Yes  |   |                  |                |  |  |
|---|--|---|---|------------------|----------------|--|--|
| Ė.  |  | Accepting Child   | dren's Health Insurance Program (CHIP) Men      | nbers? Yes       |                |  |  |
| O <sup>2</sup>  |  |   | rved: Children/Youth and Adults.                |                  |                |  |  |
|   |  | <b>Cultural Abilitie</b>  | s: Transitional Age Youth, Lesbian, Gay, Bisex  | ual, or Transgen | der.           |  |  |
|   |  | Office Hours:   | Monday - Friday 8:00 am - 8:00 pm               |                  |                |  |  |
|   |  |   | Saturday - Sunday 10:00 am - 7:00 pm            |                  |                |  |  |
|   |  | website: https://   | www.sjcbhs.org/index.aspx                       | 1                |                |  |  |
| Last Name   | First Name                             | NPI   | Type of License                                 | License #        | CC and<br>Date |  |  |
|   |  |   | 71  | 131299           |                |  |  |
| Agans   | Adrianna                               | 1851831242  | Licensed Marriage and Family Therapist          | 2/28/2026        | Y 2/1/2020     |  |  |
|   |  |   | , ,   | 112335           |                |  |  |
| DeLaTorre   | Sandra                                 | 1679976229  | Associate Clinical Social Worker                | 11/30/2025       | Y 1/1/2018     |  |  |
|   |  |   |   | 125801           | Y              |  |  |
| Merlos  | Luis                                   | 1588211825  | Associate Clinical Social Worker                | 9/30/2025        | 8/26/2019      |  |  |
|   |  |   |   | 41866            |                |  |  |
| Mullen  | Alvin Jay                              | 1336808971  | Licensed Psychiatric Technician                 | 4/30/2026        | Y 2/1/2024     |  |  |
|   |  |   |   | 37620            | , ,            |  |  |
| Pablico   | Shiella                                | 1588036321  | Licensed Psychiatric Technician                 | 10/31/2025       | Y 1/1/2018     |  |  |
|   |  |   | ,   | A112447          | Y              |  |  |
| Hira-Brar   | Shabneet                               | 1851598452  | Physician                                       | 4/30/2026        | 3/14/2025      |  |  |
|   |  |   |   | 79068            |                |  |  |
| Yocham  | Amanda                                 | 1326103516  | Licensed Marriage and Family Therapist          | 2/28/2026        | Y 1/1/2018     |  |  |
|   |  |   |   | 138440           | Υ              |  |  |
| Zodikoff  | Katelyn                                | 1629418678  | Licensed Marriage and Family Therapist          | 3/31/2027        | 4/24/2024      |  |  |
| Program Name:<br>Health Facility (Pl<br>Type of Program<br>Address: 1212 N<br>City: Stockton, C | HF) #3976<br>n: MH<br>l. California St | Services/Specialties/Modalities Program Provides: Inpatient psychiatric hospitalization services. |   |                  |                |  |  |
| Phone Number:   | (209) 468-8686                         | Telehealth Serv   | rices Provided: Yes                             |                  |                |  |  |
| Lingustic capab   | •                                      | Accepting New   | Members: Yes                                    |                  |                |  |  |
| Interpreter service   | es are available                       |   |   |                  |                |  |  |
| for languages oth   | er than English.                       |   |   |                  |                |  |  |
| Ŀ   |  | Accepting Children's Health Insurance Program (CHIP) Members? No                                  |   |                  |                |  |  |
|   |  | Populations ser   | rved: Adults.                                   |                  |                |  |  |
|   |  | •   | s: Veterans, Older Adults, Lesbian, Gay, Bisex  | ual, or Transgen | der.           |  |  |
|   |  | Office Hours: (   |   |                  |                |  |  |
|   |  |   | www.sjcbhs.org/psychiatric_health_facility.aspx |                  |                |  |  |
|   |  |   | ,   |                  |                |  |  |

|           | F: (N      |            |  | License #    | CC and |
|-----------|------------|------------|--|--------------|--------|
| Last Name | First Name | NPI        | Type of License                        | and Exp Date | Date   |
|           |            |            |  | 40284        |        |
| Bareng    | Jeff       | 1043753478 | Licensed Psychiatric Technician        | 2/28/2026    | Υ      |
|           |            |            |  | 32628        |        |
| Bokelman  | Roy        | 111404003  | Licensed Psychiatric Technician        | 9/30/2026    | Υ      |
|           |            |            |  | 713008       |        |
| Brown     | Brandi     | 1316060023 | Registered Nurse                       | 1/31/2027    | Υ      |
|           |            |            |  | 565185       |        |
| Cabrera   | Gilbert    | 1679693766 | Registered Nurse                       | 8/31/2025    | Υ      |
|           |            |            |  | 65302        |        |
| Camello   | Bena       | 1053581116 | Licensed Clincial Social Worker        | 9/30/2026    | Υ      |
|           |            |            |  | 34295        |        |
| Clutario  | Dindo      | 1164664512 | Licensed Psychiatric Technician        | 9/30/2025    | Υ      |
|           |            |            |  | 41990        |        |
| Daniel    | Steven     | 1184366528 | Licensed Psychiatric Technician        | 1/31/2027    | Υ      |
|           |            |            |  | 824521       |        |
| Dapon     | Jeanette   | 1780152918 | Registered Nurse                       | 2/28/2026    | Υ      |
|           |            |            |  | 34221        |        |
| DeJesus   | Carolyn    | 1861650228 | Licensed Psychiatric Technician        | 10/31/2025   | Υ      |
|           |            |            |  | 42964        |        |
| Garner    | Sarah      | 1437943404 | Licensed Psychiatric Technician        | 9/30/2026    | Υ      |
|           |            |            |  | A49224       |        |
| Gill      | Paramijit  | 1073629218 | Physician                              | 9/30/2026    | Υ      |
|           |            |            |  | G70479       |        |
| Graff     | Robert     | 1366560112 | Physician                              | 8/31/2026    | Υ      |
|           |            |            |  | 28726        |        |
| Harbin    | Toni       | 1639475049 | Licensed Psychiatric Technician        | 12/31/2026   | Υ      |
| Hardy     | Denise     |            |  | 33714        |        |
| Tialuy    | Dellise    | 1912202813 | Licensed Psychiatric Technician        | 1/31/2027    | Υ      |
|           |            |            |  | 37605        |        |
| Holmes    | Sherronya  | 1205214228 | Licensed Psychiatric Technician        | 2/28/2026    | Υ      |
|           |            |            |  | 41886        |        |
| Kaur      | Narinder   | 1063006294 | Licensed Psychiatric Technician        | 6/30/2026    | Υ      |
|           |            |            |  | 198957       |        |
| Kottke    | Marline    | 1891223111 | Licensed Vocational Nurse              | 5/31/2027    | Υ      |
|           |            |            |  | 764452       |        |
| Laizer    | Gloria     | 1255706479 | Registered Nurse                       | 7/31/2027    | Υ      |
|           |            |            |  | 103862       |        |
| Lambert   | Rekha      | 1164647525 | Licensed Marriage and Family Therapist | 9/30/2025    | Υ      |
|           |            |            |  | 99397        |        |
| Limas     | Stephanie  | 1053433748 | Licensed Marriage and Family Therapist | 11/30/26     | Υ      |

|            |              |                |  | 28731      |    |
|------------|--------------|----------------|--|------------|----|
| Little     | Christy      | 1497978795     | Licensed Psychiatric Technician        | 7/31/2025  | Υ  |
|            |              |                |  | 42402      |    |
| Lo         | Muacong      | 1689300857     | Licensed Psychiatric Technician        | 12/31/2025 | Υ  |
|            |              |                |  | 42399      |    |
| Martin     | Kaitlyn      | 1548959802     | Licensed Psychiatric Technician        | 8/31/2026  | Υ  |
|            |              |                |  | 797022     |    |
| Mendoza    | Michelle     | 1477951812     | Registered Nurse                       | 10/30/2026 | Υ  |
|            |              |                |  | 43021      |    |
| Mendoza    | Regina       | 1992421150     | Licensed Psychiatric Technician        | 2/28/2027  | Υ  |
|            |              |                |  | 29086      |    |
| Michael    | Kimberley    | 1538831151     | Licensed Psychiatric Technician        | 7/31/2026  | Υ  |
|            |              |                |  | 38249      |    |
| Mocko      | James        | 1558726224     | Licensed Psychiatric Technician        | 1/31/2027  | Υ  |
|            |              |                |  | 84045      |    |
| Myotte     | Wendy        | 1265554638     | Licensed Marriage and Family Therapist | 1/31/2026  | Υ  |
|            |              |                |  | 33792      |    |
| Ota        | Robert       | 1578786554     | Licensed Psychiatric Technician        | 7/31/2027  | Υ  |
|            |              |                |  | 33726      |    |
| Pinano     | Paolo        | 1245352616     | Licensed Psychiatric Technician        | 11/30/2026 | Υ  |
|            |              |                |  | 29213      |    |
| Rios       | Teri         | 1942323829     | Licensed Psychiatric Technician        | 2/28/2026  | Υ  |
|            |              |                |  | 27494      |    |
| Ruiz       | Ronald       | 1700907094     | Licensed Psychiatric Technician        | 6/30/2026  | Υ  |
|            |              |                |  | 831415     |    |
| Sahota     | Mandeep      | 1609536994     | Registered Nurse                       | 11/30/2026 | Υ  |
|            |              |                |  | 547944     |    |
| Seraypheap | Arunny       | 1013037274     | Registered Nurse                       | 8/31/2026  | Υ  |
|            |              |                |  | 30936      |    |
| Sesante    | Maria        | 1851515720     | Licensed Psychiatric Technician        | 8/31/2026  | Υ  |
|            |              |                |  | 95297276   |    |
| Singh      | Jasvir       | 1477833911     | Registered Nurse                       | 1/31/2026  | Υ  |
|            |              |                |  | C33442     |    |
| Silver     | Hilary       | 1720201221     | Physician                              | 2/28/2027  | Υ  |
|            |              |                |  | 95171895   |    |
| Tuning     | Frankie      | 1073631727     | Registered Nurse                       | 3/31/2026  | Υ  |
| T          | Cla a ul a a | 4700044434     | Physician                              | G185940    | V  |
| Tupper     | Charles      | 1700944121     | Physician                              | 5/31/2027  | Y  |
|            |              | 42666665       |  | 34435      | ., |
| Varquez    | Sharon       | 1366682387     | Licensed Psychiatric Technician        | 11/30/2025 | Y  |
| v en       |              | 4.4.75.4.000.5 |  | 36449      |    |
| Villasenor | Kendra       | 1447518204     | Licensed Psychiatric Technician        | 11/30/2025 | Υ  |

|  |  |  |   | 701021                      |                |  |  |
|--|--|--|---|-----------------------------|----------------|--|--|
| Winck  | Angela   | 1083002992   | Registered Nurse                                | 9/30/2026                   | Υ              |  |  |
| Program Name: Restart Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202  |  | Services/Specialties/Modalities Program Provides: Provides mental health services for severely mentally ill adults with history of justice involvement.  |   |                             |                |  |  |
| Phone Number:(   | •  |  | ices Provided: No                               |                             |                |  |  |
| Interpreter service  | Lingustic capabilities: Interpreter services are available for languages other than English. |  | Members: Yes                                    |                             |                |  |  |
| Ŀ  |  | Accepting Child  | dren's Health Insurance Program (CHIP) Men      | nbers? No                   |                |  |  |
|  |  | Populations ser  |   |                             |                |  |  |
|  |  | <b>Cultural Abilities:</b> Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender.   |   |                             |                |  |  |
|  |  |  | /londay - Friday 8:00 am - 5:00 pm              |                             |                |  |  |
|  | 1  | website: https://v   | vww.sjcbhs.org/index.aspx                       |                             |                |  |  |
| Last Name  | First Name   | NPI  | Type of License                                 | License #<br>and Exp Date   | CC and<br>Date |  |  |
| Lust Hume  | i ii se reaii e  |  | Type of Election                                | 154569                      | Y              |  |  |
| Bautista   | Daniel   | 1407490733   | Associate Marriage and Family Therapist         | 4/30/2026                   | 10/31/201      |  |  |
| Brown  | Monique  | 1962641050   | Licensed Marriage and Family Therapist          | 46467<br>7/31/2026<br>86636 | N              |  |  |
| Campos-<br>Martinez  | Elizabeth  | 1912603531   | Licensed Clinical Social Worker                 | 11/30/2026                  | Y 5/5/2025     |  |  |
| Castro   | Gerardo  | 1780123737   | Associate Clinical Social Worker                | 117866<br>9/30/2026         | Y 1/1/2018     |  |  |
| Program Name: San Joaquin County MH Services Lodi Clinic #3924 Type of Program: MH Address:1209 W.Tokay Street City: Lodi, CA 95240-3845 Phone Number:(209) 331-2070 Lingustic capabilities: |  | Services/Specialties/Modalities Program Provides: Medication, case management, rehabilitative services, group rehabilitation, group therapy, and individual therapy.  Telehealth Services Provided: Yes Accepting New Members: Yes |   |                             |                |  |  |
| Interpreter service for languages oth  |  | Accepting Children's Health Insurance Program (CHIP) Members? N/A  |   |                             |                |  |  |
| Ġ.   |  |  | rved: Children/Youth and Adults.                | 10010111//                  |                |  |  |
|  |  | Cultural Abilitie or Transgender.  | s: Veterans, Older Adults, Transitional Age You | uth, Lesbian, Gay           | /, Bisexual,   |  |  |

| Office Hours: Monday - Friday, 8:00 am - 5:00 pm   |                 |  |  |              |            |  |
|--|-----------------|--|--|--------------|------------|--|
|  |                 | website: https://www.sjcbhs.org/adult.aspx   |  |              |            |  |
|  |                 |  |  | License #    | CC and     |  |
| Last Name  | First Name      | NPI  | Type of License  | and Exp Date | Date       |  |
|  |                 |  |  | 113250       | Υ          |  |
| Chavez   | April           | 1760959670   | Licensed Marriage and Family Therapist                   | 5/31/2027    | 5/31/2024  |  |
|  |                 |  |  | 50961        |            |  |
| Domingo  | Jennifer        | 1104097286   | Licensed Marriage and Family Therapist                   | 6/30/2027    | Y 11/13/24 |  |
|  |                 |  |  | 352081       | Υ          |  |
| Hollowell  | Shirley         | 1124143474   | Registered Nurse   | 11/30/2025   | 7/25/2025  |  |
|  |                 |  |  | 92751        | Υ          |  |
| Phillips   | Victoria        | 1871110437   | Associate Clinical Social Worker                         | 10/31/25     | 7/29/2020  |  |
|  |                 |  |  | 42121        | Υ          |  |
| Ramiscal   | Rio             | 1851046700   | Licensed Psychiatric Technician                          | 6/30/2027    | 7/25/2025  |  |
|  |                 |  |  | A95786       | Υ          |  |
| Rizvi  | Saba            | 1619190501   | Physician  | 6/30/2026    | 9/24/2019  |  |
|  |                 |  |  | 152787       | Υ          |  |
| Romero   | Karla           | 1083133276   | Associate Marriage and Family Therapist                  |              | 7/25/2025  |  |
|  |                 |  |  | A68523       |            |  |
| Soares Program Name:   | Ana             | 1922191410   | Physician<br>alties/Modalities Program Provides: CBT, DB | 9/30/2026    | Υ          |  |
| County MH Services Tracy Clinic #9048  Type of Program: MH  Address: 220 W. Eleventh Street City: Tracy, CA 95376-3944  Phone Number:(209)831-5941  Lingustic capabilities: Interpreter services are available for languages other than English. |                 | Therapy, and Group Therapy.  Telehealth Services Provided: Yes  Accepting New Members: Yes                         |  |              |            |  |
|  |                 | Accepting Children's Health Insurance Program (CHIP) Members? N/A.   |  |              |            |  |
|  |                 | Populations served: Adults.  |  |              |            |  |
|  |                 | <b>Cultural Abilities:</b> Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |  |              |            |  |
|  |                 | Office Hours: Monday - Friday 8:00 am - 5:00 pm  |  |              |            |  |
| website:https://www.sjcbhs.org/adult.aspx  |                 |  |  |              |            |  |
|  |                 |  |  | License #    | CC and     |  |
| Last Name  | First Name      | NPI  | Type of License  | and Exp Date | Date       |  |
| Last Ivallie   | i ii st ivaille | IVE  | Type of License  | 137032       | Date       |  |
| Arcega   | Christina       | 1609219450   | Licensed Marriage and Family Therapist                   | 1/31/2027    | Y 8/1/2025 |  |

| [T   |                     |   |   | 115736                         | Υ          |  |
|--|---------------------|---|---|--------------------------------|------------|--|
| Dwyer-Manzo  | Danyelle            | 1124672266  | Associate Clinical Social Worker                            | 6/30/2026                      | 6/18/2025  |  |
|  | •                   |   |   | G172144                        | Υ          |  |
| Everson  | Maja                | 1811975139  | Physician   | 4/30/2027                      | 6/18/2025  |  |
|  | Jon                 |   |   | 130945                         |            |  |
| Gutoman  | Christopher         | 1578814042  | Licensed Marriage and Family Therapist                      | 2/28/2026                      | Y 7/9/2025 |  |
|  |                     |   |   | 352081                         | Υ          |  |
| Hollowell  | Shirley             | 1124143474  | Registered Nurse  | 11/30/25                       | 7/25/2025  |  |
|  |                     |   |   | 82994                          |            |  |
| Hudson   | Dana                | 1225172489  | Licensed Marriage and Family Therapist                      | 2/28/2026                      | Y 8/1/2025 |  |
|  |                     |   |   | 38333                          |            |  |
| Keys   | Sheryl              | 1942664875  | Psychiatric Technican                                       | 3/31/2027                      | Y 1/1/2019 |  |
|  |                     |   |   | 691250                         |            |  |
| Pasa   | Angelo              | 1689874125  | Registered Nurse  | 10/31/26                       | Y 1/1/2020 |  |
|  |                     |   |   | 117183                         |            |  |
| Stokes   | Vicki               | 1164061024  | Licensed Clinical Social Worker                             | 8/31/2027                      | Y 8/1/2025 |  |
| program. #9014  Type of Program: MH  Address: 4422 N.Pershing Ave  City: Stockton, CA 95207  Phone Number:(209) 953-8843  Lingustic capabilities: Interpreter services are available for languages other than English. |                     | Telehealth Services Provided: Yes  Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:00 am - 5:00 pm |   |                                |            |  |
|  |                     | website: https://www.sjcbhs.org/transcultural_clinic.aspx   |   |                                |            |  |
|  |                     |   |   |                                |            |  |
|  |                     |   |   | License #                      | CC and     |  |
| Last Name  | First Name          | NPI   | Type of License   | and Exp Date                   | Date       |  |
|  |                     |   |   | 81785                          |            |  |
| Chukwuka   | Ogiram              | 1063662781  | Licensed Clinical Social Worker                             | 10/31/25                       | Y 10/25/23 |  |
| 1  |                     |   |   | 352081                         | Υ          |  |
|  |                     |   |   |                                | •          |  |
| Hollowell  | Shirley             | 1124143474  | Registered Nurse  | 11/30/25                       | 7/25/2025  |  |
|  | Shirley<br>Amandeep | 1124143474<br>1104682475  | Registered Nurse  Associate Professional Clinical Counselor | 11/30/25<br>136275<br>12/31/25 | ·          |  |

| -                                | T                | 1   |  | T                 |             |  |  |  |
|----------------------------------|------------------|---|--|-------------------|-------------|--|--|--|
|                                  |                  |   |  | 845080            |             |  |  |  |
| Nguyen                           | Quynh-Chi        | 1417371014  | Registered Nurse   | 9/30/2026         | Y 4/8/2025  |  |  |  |
|                                  |                  |   |  | 24260             | Υ           |  |  |  |
| Perera                           | Manoj            | 11568470946   | Licensed Clincial Social Worker  | 6/30/2024         | 7/30/2025   |  |  |  |
|                                  |                  |   |  | 130779            |             |  |  |  |
| Thao                             | Seelina          | 1215093653  | Associate Marriage and Family Therapist  | 1/31/2026         | Y 1/1/2020  |  |  |  |
| Program Name:                    | Southeast        | Services/Specia   | alties/Modalities Program Provides: DBT, CB  | T, Solution focus | sed,        |  |  |  |
| Asian Recovery S                 |                  | Individual Therapy, and Group Therapy.                                    |  |                   |             |  |  |  |
| (SEARS) for the S                | Southeast Asian  |   |  |                   |             |  |  |  |
| population-Full Se               | ervice           |   |  |                   |             |  |  |  |
| Partnership (MHS                 | SA) #9094        |   |  |                   |             |  |  |  |
| Type of Program                  | n: MH            |   |  |                   |             |  |  |  |
| Address:4422 N.                  |                  |   |  |                   |             |  |  |  |
| City: Stockton, C                | _                |   |  |                   |             |  |  |  |
| Phone Number:                    |                  | Telehealth Serv   | ices Provided: Yes   |                   |             |  |  |  |
| Lingustic capab                  | •                | Accepting New   |  |                   |             |  |  |  |
| Interpreter service              |                  | Accepting New   | members. 163   |                   |             |  |  |  |
| for languages oth                |                  |   |  |                   |             |  |  |  |
|                                  | or than English. |   |  |                   |             |  |  |  |
| Ŀ                                |                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A         |  |                   |             |  |  |  |
|                                  |                  |   | Populations served: Adults.  |                   |             |  |  |  |
|                                  |                  | Cultural Abilities: Older Adults, Lesbian, Gay, Bisexual, or Transgender. |  |                   |             |  |  |  |
|                                  |                  | Office Hours: Monday - Friday 8:00 am - 5:00 pm                           |  |                   |             |  |  |  |
|                                  |                  |   | website: https://www.sjcbhs.org/transcultural_clinic.aspx                                  |                   |             |  |  |  |
|                                  |                  |   |  |                   |             |  |  |  |
|                                  |                  |   |  | License #         | CC and      |  |  |  |
| Last Name                        | First Name       | NPI   | Type of License  | and Exp Date      | Date        |  |  |  |
|                                  |                  |   |  | 81785             |             |  |  |  |
| Chukwuka                         | Ogiram           | 1063662781  | Licensed Clinical Social Worker  | 10/31/25          | Y 10/25/23  |  |  |  |
|                                  |                  |   |  | 352081            | Υ           |  |  |  |
| Hollowell                        | Shirley          | 1124143474  | Registered Nurse   | 11/30/2025        | 7/25/2025   |  |  |  |
|                                  | ·                |   |  | 136275            |             |  |  |  |
| Kaur                             | Amandeep         | 1104682475  | Associate Professional Clinical Counselor  | 12/31/25          | Y 12/20/24  |  |  |  |
|                                  | · ·              |   |  | 845080            |             |  |  |  |
| Nguyen                           | Quynh-Chi        | 1417371014  | Registered Nurse   | 9/30/2026         | Y 4/8/2025  |  |  |  |
| 8-7                              |                  | 1=151=1   | -0   | 24260             | γ γ         |  |  |  |
| Perera                           | Manoj            | 11568470946   | Licensed Clinical Social Worker  | 6/30/2027         | 7/30/2025   |  |  |  |
| 0.0.0                            |                  |   |  | 130779            | ., 55, 2525 |  |  |  |
| Thao                             | Seelina          | 1215093653  | Associate Marriage and Family Therapist  | 1/31/2026         | Y 1/1/2020  |  |  |  |
| CONTRACT ORG                     |                  |   |  | , , , , , , , ,   | , ,====     |  |  |  |
| CONTINUE ON                      |                  |   |  |                   |             |  |  |  |
| Program Namo                     | Δsniranot        | Services/Snecis   | altige/Modalitige Program Provides: Crisis St  | ahilization Thora | •           |  |  |  |
| Program Name:<br>Type of Program | •                | <u>-</u>  | alties/Modalities Program Provides: Crisis Staces (TBS), Family Urgent Response (FURS), Ta |                   | •           |  |  |  |

Address: 2423 W. March Lane

Suite 200

City: Stockton, CA 95207

Phone Number: (209) 623-1411

Lingustic capabilities:

Interpreter services are available for languages other than English.

Service Partnership Transitional Age Youth Outpatient, Case Management Brokerage/ Intensive Care Coordination (ICC), and Mental Health Services including Intensive Home based services (IHBS).

Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Children/Youth

Cultural Abilities: Transitional age youth, Lesbia, Gay, Bisexual, and Transgender.

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

website: https://www.aspiranet.org

|           |              |            |   | License #    | CC and     |
|-----------|--------------|------------|---|--------------|------------|
| Last Name | First Name   | NPI        | Type of License                           | and Exp Date | Date       |
|           |              |            |   | 145619       |            |
| Bainiwal  | Rajbir       | 1023580206 | Associate Marriage and Family Therapst    | 3/31/2026    | Y 7/2/2025 |
|           |              |            |   | 113910       | Υ          |
| Benitez   | Felecia      | 1780389015 | Associate Clinical Social Worker          | 2/28/2026    | 6/26/2025  |
|           |              |            |   | 19579        | Υ          |
| Callejas  | Jazmine      | 1194465112 | Associate Professional Clinical Counselor | 6/30/2026    | 6/23/2025  |
|           |              |            |   | 14610        | Υ          |
| Carpenter | Brandon      | 1659148963 | Associate Professional Clinical Counselor | 9/30/2025    | 6/16/2025  |
|           |              |            |   | 137674       | Υ          |
| Garcia    | Isamar       | 1093461576 | Associate Marriage and Family Therapist   | 2/28/2026    | 6/18/2025  |
|           |              |            |   | 154289       | Υ          |
| Juarez    | Luzerito     | 1417436155 | Licensed Marriage and Family Therapist    | 3/31/2027    | 6/10/2025  |
|           |              |            |   | 10596        | Υ          |
| Ortega    | Richard      | 1003386715 | Associate Professional Clinical Counselor | 10/31/2025   | 6/26/2025  |
|           |              |            |   | 130993       | Υ          |
| Roe       | Marionne     | 1447919352 | Associate Clinical Social Worker          | 6/30/2026    | 6/26/2025  |
|           |              |            |   | 142415       | Υ          |
| Sheen     | Roma Cachero | 1962008565 | Associate Marriage and Family Therapist   | 10/31/2025   | 6/25/2025  |

Program Name: Casa Pacifica

#39AB

Type of Program: MH

Address: 1722 S. Lewis Road City: Camarrillo, CA 93012 Phone Number: (805) 981-1422

Lingustic capabilities:

Interpreter services are available for languages other than English.

Services/Specialties/Modalities Program Provides: Case Management

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

Telehealth Services Provided:

**Accepting New Members:** Yes

Accepting Children's Health Insurance Program (CHIP) Members?

| J                                       |                  | Populations so  | ved: Children and Youth.                       |                     |          |  |  |
|---|------------------|---|--|---------------------|----------|--|--|
|   |                  |   | s: Provides outpatient mental health services. |                     |          |  |  |
|   |                  |   | Monday - Friday, 8:00 am - 5:00 pm             |                     |          |  |  |
|   |                  |   | www.casapacifica.org/                          |                     |          |  |  |
|   | I                | website. https//  | I  |                     |          |  |  |
|   |                  |   |  | License #           | CC and   |  |  |
| Last Name                               | First Name       | NPI   | Type of License                                | and Exp Date        | Date     |  |  |
| D 1                                     | 0010             |   | T OF COUNTY PROVIDER                           |                     | •        |  |  |
| Program Name:                           |                  | •   | alties/Modalities Program Provides:Mental H    | ealth Services Into | ensive   |  |  |
| (University of the                      | •                | Home Based Se   | rvices.  |                     |          |  |  |
| Type of Program                         |                  |   |  |                     |          |  |  |
| Address:405 E. F                        |                  |   |  |                     |          |  |  |
| City: Stockton, C                       |                  | Talahaalth Cam  | iaaa Duayidada Vaa                             |                     |          |  |  |
| Phone Number:(                          | •                | Accepting New   | ices Provided: Yes                             |                     |          |  |  |
| Lingustic capabi<br>Interpreter service |                  | Accepting New   | wembers: res                                   |                     |          |  |  |
| for languages oth                       |                  |   |  |                     |          |  |  |
|   | er than English. |   |  |                     |          |  |  |
| Ŀ                                       |                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |  |                     |          |  |  |
|   |                  | Populations served: Adults.   |  |                     |          |  |  |
|   |                  | Cultural Abilities:   |  |                     |          |  |  |
|   |                  | Office Hours: Monday - Friday 8:00 am - 5:00 pm                                     |  |                     |          |  |  |
|   |                  | website: none   |  |                     |          |  |  |
|   |                  |   |  |                     |          |  |  |
|   |                  |   | _  | License #           | CC and   |  |  |
| Last Name                               | First Name       | NPI   | Type of License                                | and Exp Date        | Date     |  |  |
|   |                  |   | ON LICENSED STAFF ONLY                         |                     |          |  |  |
| Program Name:                           |                  |   | alties/Modalities Program Provides: Provides   | outpatient menta    | l health |  |  |
| Prevention Counc                        |                  | services utilizing a strenghthening family approach.                                |  |                     |          |  |  |
| Type of Program                         |                  |   |  |                     |          |  |  |
| Address: 540 N.                         |                  |   |  |                     |          |  |  |
| City:Stockton, CA                       |                  |   |  |                     |          |  |  |
| Phone Number: (209) 644-5311            |                  | Telehealth Services Provided: Yes   |  |                     |          |  |  |
| Lingustic capabi                        |                  | Accepting New Members: Yes  |  |                     |          |  |  |
| Interpreter services are available      |                  |   |  |                     |          |  |  |
| for languages other than English.       |                  | Assessfing Obildrends Haskin by D. (OHID) M. J. ONIA                                |  |                     |          |  |  |
| Ŀ                                       |                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |  |                     |          |  |  |
|   |                  | Populations served: Children/Youth.   |  |                     |          |  |  |
|   |                  | Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |  |                     |          |  |  |
|   |                  | Office Hours: Monday - Friday 8:00 am - 5:00 pm                                     |  |                     |          |  |  |
|   |                  | website: www.nochildabuse.org   |  |                     |          |  |  |

|  |               |  |  | License #    | CC and     |  |  |
|--|---------------|--|--|--------------|------------|--|--|
| Last Name  | First Name    | NPI  | Type of License  | and Exp Date | Date       |  |  |
|  |               |  |  | 147061       | Υ          |  |  |
| Archangel  | Ashle         | 1801216965   | Associate Marriage and Family Therapist  | 5/31/2026    | 3/28/2025  |  |  |
|  |               |  |  | 150502       | Υ          |  |  |
| Beck   | Vienna        | 1396390878   | Licensed Marriage and Family Therapist   | 10/31/2026   | 3/25/2025  |  |  |
|  |               |  |  | 145483       | Υ          |  |  |
| Dacus  | Lacey         | 1447759675   | Associate Marriage and Family Therapist  | 3/31/2026    | 2/26/2025  |  |  |
|  |               |  |  | 16470        |            |  |  |
| Jacka  | Karen         | 1790908788   | Licensed Clinical Social Worker  | 7/31/2026    | Υ          |  |  |
|  |               |  |  | 152346       | Υ          |  |  |
| Looney  Program Name:  | Taylere       | 1003553223   | Licensed Marriage and Family Therapist alties/Modalities Program Provides: SMHS,   | 12/31/2026   | 3/25/2025  |  |  |
| City: Stockton, CA 95205 Phone Number:(209) 466-0853 Lingustic capabilities: Interpreter services are available for languages other than English.                      |               | Telehealth Services Provided: Yes  Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Children/Youth.  Cultural Abilities: Lesbian, Gay, Bisexual, or Transgender. |  |              |            |  |  |
|  |               | Website: https://  | 00 am - 5:00 pm/ Residential 24 hrs  |              |            |  |  |
|  | <u> </u>      | Website: https://  | Unation to the control of the contro | 1            |            |  |  |
|  |               |  |  | License #    | CC and     |  |  |
| Last Name  | First Name    | NPI  | Type of License  | and Exp Date |            |  |  |
|  |               |  | Al.  | 157765       | Υ          |  |  |
| Lopez  | Stephanie     | 1184385908   | Licensed Marriage and Family Therapist   | 9/30/2027    | 1/24/2025  |  |  |
| -  |               |  | -  | 120751       | Υ          |  |  |
| Reinhardt  | Janae         | 1689296311   | Licensed Clinical Social Worker  | 1/31/2026    | 2/10/2025  |  |  |
|  |               |  |  | C35361       |            |  |  |
| Ruggles  | James         | 2084P0804X   | Physician  | 2/28/27      | Y 10/16/24 |  |  |
| Program Name: Children's Home of Stockton - Triplex Cottages #39BJ Type of Program: MH Address: 1227 E Lindsay St City: Stockton, CA 95205 Phone Number:(209) 466-0853 |               | Services/Specialties/Modalities Program Provides: SMHS, TCM/ICC, IHBS, Medication Support, and Crisis Intervention.  |  |              |            |  |  |
| r none muniber.  | 203) 400-0000 | reletitatili Selv  | ices Provided: Yes   |              |            |  |  |

| limmustis sausti                           | litica           | A a a a ratio a a N a  | Marshauer Voo                                   |                 |            |  |  |
|--|------------------|--|---|-----------------|------------|--|--|
| Lingustic capabi                           |                  | Accepting New  | Members: Yes                                    |                 |            |  |  |
| Interpreter service<br>for languages other |                  |  |   |                 |            |  |  |
|  | er man English.  |  |   |                 |            |  |  |
| Ġ.   |                  |  | dren's Health Insurance Program (CHIP) Men      | nbers? N/A      |            |  |  |
|  |                  | •  | rved: Children/Youth.                           |                 |            |  |  |
|  |                  |  | s: Lesbian, Gay, Bisexual, or Transgender.      |                 |            |  |  |
|  |                  |  | londay-Friday 8:00 am- 5:00 pm / Residential 24 | 4 hours.        |            |  |  |
|  |                  | website:https://c  | chstockton.org/                                 |                 |            |  |  |
|  |                  |  |   |                 |            |  |  |
|  | _                |  |   | License #       | CC and     |  |  |
| Last Name                                  | First Name       | NPI  | Type of License                                 | and Exp Date    | Date       |  |  |
|  |                  |  |   | 157765          | Υ          |  |  |
| Lopez                                      | Stephanie        | 1184385908   | Licensed Marriage and Family Therapist          | 9/30/2027       | 1/24/2025  |  |  |
|  |                  |  |   | 120751          | Υ          |  |  |
| Reinhardt                                  | Janae            | 1689296311   | Licensed Clinical Social Worker                 | 1/31/2026       | 2/10/2025  |  |  |
|  |                  |  |   | C35361          |            |  |  |
|  | James            | 2084P0804X   | Physician                                       | 2/28/27         | Y 10/16/24 |  |  |
| Program Name:                              | *                | -  | alties/Modalities Program Provides: Case Ma     | anagement/ Brok | kerage;    |  |  |
| Entry Program ILS                          |                  | Mental Health Se   | ervices; Crisis Intervention.                   |                 |            |  |  |
| Type of Program                            |                  |  |   |                 |            |  |  |
| Address:405 E. F                           |                  |  |   |                 |            |  |  |
| City: Stockton, CA                         |                  | Telehealth Services Provided: Yes Accepting New Members: Yes |   |                 |            |  |  |
| Phone Number:(2                            | •                |  |   |                 |            |  |  |
| Lingustic capabi                           |                  |  |   |                 |            |  |  |
| Interpreter service                        |                  |  |   |                 |            |  |  |
| for languages othe                         | er than English. |  |   |                 |            |  |  |
| Ŀ  |                  | Accepting Child  | dren's Health Insurance Program (CHIP) Men      | nbers? N/A      |            |  |  |
|  |                  | Populations ser  | rved: Adults.                                   |                 |            |  |  |
|  |                  | <b>Cultural Abilitie</b>                                     | s:  |                 |            |  |  |
|  |                  | Office Hours: N  | Nonday - Friday 8:00 am - 5:00 pm               |                 |            |  |  |
|  |                  | website: none  |   |                 |            |  |  |
|  |                  |  |   |                 |            |  |  |
|  |                  |  |   | License #       | CC and     |  |  |
| Last Name                                  | First Name       | NPI  | Type of License                                 | and Exp Date    | Date       |  |  |
|  |                  | NC   | ON LICENSED STAFF ONLY                          |                 |            |  |  |
| Program Name:                              | EA Family        | Services/Specia  | alties/Modalities Program Provides: Specialt    | y Mental Health | Services.  |  |  |
| Services #39CP                             |                  | (SMHS)   |   |                 |            |  |  |
| Type of Program                            | : MH             |  |   |                 |            |  |  |
|  |                  |  |   |                 |            |  |  |
| Address: 525 W.                            | Kettleman Lane   |  |   |                 |            |  |  |
| City: Lodi, CA 952                         | 240              |  |   |                 |            |  |  |
| Phone Number:(2                            |                  | Telehealth Serv  | rices Provided: Yes                             |                 |            |  |  |
|  | ,                |  |   |                 |            |  |  |

| •                                     | Lingustic capabilities: Interpreter services are available |   | Accepting New Members: Yes                      |                  |           |  |  |
|---------------------------------------|--|---|---|------------------|-----------|--|--|
| for languages other                   |  |   |   |                  |           |  |  |
| 5.                                    | 51 tiloi1 =119115111                                       | Accepting Child   | dren's Health Insurance Program (CHIP) Mem      | hers? N/A        |           |  |  |
| Ci.                                   |  |   | rved: Children/Youth.                           | 10010111171      |           |  |  |
|                                       |  |   | s: Transitional Age Youth, Lesbian, Gay, Bisexi | ual, or Transgen | der.      |  |  |
|                                       |  | Office Hours: 2   | <u> </u>  |                  |           |  |  |
|                                       |  | website: www.e  | a.org   |                  |           |  |  |
|                                       |  |   |   |                  |           |  |  |
|                                       |  |   |   | License #        | CC and    |  |  |
| Last Name                             | First Name   | NPI   | Type of License                                 | and Exp Date     | Date      |  |  |
|                                       |  |   |   | 130645           | Υ         |  |  |
| Chayrez                               | Darla  | 1033901202  | Associate Social Worker                         | 6/30/2026        | 10/7/2024 |  |  |
| Program Name:  <br>Services Losh ST   | •  | •   | alties/Modalities Program Provides: Specialty   | y Mental Health  | Services. |  |  |
|                                       |  | (SMHS)  |   |                  |           |  |  |
| Type of Program Address: 601 Pa       |  |   |   |                  |           |  |  |
|                                       |  |   |   |                  |           |  |  |
| City: Lodi, CA 952<br>Phone Number:(2 |  | Tolohoolth Some   | vices Bravidad: Vos                             |                  |           |  |  |
| Lingustic capabi                      | •  | Telehealth Services Provided: Yes   |   |                  |           |  |  |
| Interpreter service                   |  | Accepting New Members: Yes  |   |                  |           |  |  |
| for languages other                   |  |   |   |                  |           |  |  |
| ب                                     | 3  | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |   |                  |           |  |  |
| G.                                    |  | Populations served: Children/Youth.   |   |                  |           |  |  |
|                                       |  | Cultural Abilities: Lesbian, Gay, Bisexual, or Transgender.                         |   |                  |           |  |  |
|                                       |  | Office Hours: 24/7  |   |                  |           |  |  |
|                                       |  | website: www.e  |   |                  |           |  |  |
|                                       |  |   |   |                  |           |  |  |
|                                       |  |   |   | License #        | CC and    |  |  |
| Last Name                             | First Name   | NPI   | Type of License                                 | and Exp Date     | Date      |  |  |
|                                       |  |   |   | 130645           | Υ         |  |  |
| Chayrez                               | Darla  | 1033901202  | Associate Social Worker                         | 6/30/2026        | 10/7/2024 |  |  |
| Program Name:                         | EA Family  | Services/Specialties/Modalities Program Provides: Specialty Mental Health Services. |   |                  |           |  |  |
| Services #39DG                        | NALL   | (SMHS)  |   |                  |           |  |  |
| Type of Program                       |  |   |   |                  |           |  |  |
| Address: 702-13                       | J Kichmond Rd  |   |   |                  |           |  |  |
| ⊏<br><b>City:</b> Susanville, (       | CA 06130 5020  |   |   |                  |           |  |  |
| Phone Number:                         |  | Telehealth Services Provided: Yes   |   |                  |           |  |  |
| Lingustic capabi                      | •  | Accepting New   |   |                  |           |  |  |
| Interpreter service                   |  | Accepting New   | member 3. 163                                   |                  |           |  |  |
| for languages other                   |  |   |   |                  |           |  |  |
| · · · · · · · · · · · · · · · · · · · |  |   |   |                  |           |  |  |

| Ė.  |  | Accepting Child   | ren's Health Insurance Program (CHIP) Mem       | bers? N/A         |            |  |  |  |
|---|--|---|---|-------------------|------------|--|--|--|
|   |  | Populations served: Children/Youth.   |   |                   |            |  |  |  |
|   |  |   | s: Transitional Age Youth, Lesbian, Gay, Bisexi | ual, or Transgend | der.       |  |  |  |
|   |  | Office Hours: 24/7  |   |                   |            |  |  |  |
|   |  | website: www.ea   | o.org   |                   |            |  |  |  |
|   |  |   |   |                   |            |  |  |  |
|   |  |   |   | License #         | CC and     |  |  |  |
| Last Name   | First Name   | NPI   | Type of License                                 | and Exp Date      | Date       |  |  |  |
|   |  |   |   | 117512            |            |  |  |  |
| Alkire  | Cristina   | 1922844687  | Associate Social Worker                         | 8/31/2026         | Y 10/28/24 |  |  |  |
|   |  |   |   |                   |            |  |  |  |
| Townsend  | Anna   | 1124717426  | Associate Social Worker                         | 132027            | Y 10/29/24 |  |  |  |
| Program Name:   | Edgewood   | Services/Specia   | Ilties/Modalities Program Provides: Case Ma     | anagement         |            |  |  |  |
| Center for Childre  | en and Families  | Brokerage/Intens  | sive Care Coordination (ICC); Mental Health Se  | rvices including  | Intensive  |  |  |  |
| #39AV   |  | Home Based Sei  | vices (IHBS); Therapeutic Behavioral Services   | (TBS); Crisis Int | ervention  |  |  |  |
| Type of Progran   | n: MH  |   |   |                   |            |  |  |  |
| Address: 1801 \   |  |   |   |                   |            |  |  |  |
| Buildings A, D, H   |  |   |   |                   |            |  |  |  |
| City: San Francis   |  |   |   |                   |            |  |  |  |
| Phone Number:   |  | Telehealth Services Provided:   |   |                   |            |  |  |  |
| Lingustic capab   | •  | Accepting New Members: Yes  |   |                   |            |  |  |  |
| Interpreter service   |  | Accepting New Members: 100  |   |                   |            |  |  |  |
| for languages oth   |  |   |   |                   |            |  |  |  |
| Ġ.  | <b>3</b> -   | Accepting Children's Health Insurance Program (CHIP) Members?   |   |                   |            |  |  |  |
| C.  |  |   |   |                   |            |  |  |  |
|   |  | 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                                |   |                   |            |  |  |  |
|   | 1  | website: www.ed   | gewood.org<br>L                                 |                   |            |  |  |  |
|   |  |   |   | 1:                | CCd        |  |  |  |
| Last Name   | First Name   | NDI   | Turn of Linear                                  | License #         | CC and     |  |  |  |
| Last Name   | First Name   | NPI   | Type of License                                 | and Exp Date      | Date       |  |  |  |
| D N   | F14 - F11 -  |   | T OF COUNTY PROVIDER                            | 1 41              | 41         |  |  |  |
| Program Name:   |  | <u>-</u>  | Ilties/Modalities Program Provides: Individua   |                   |            |  |  |  |
| Systems-Banyan  |  | Group renabilitat   | ion, Individual rehabilitation, Case management | i, and Medication | i support. |  |  |  |
| Type of Progran   |  |   |   |                   |            |  |  |  |
|   | Ranyan Ct  |   |   |                   |            |  |  |  |
| Address: 1708 E   | •  |   |   |                   |            |  |  |  |
| City: Ceres, CA   | 95307  | T   1   1/1 A   |   |                   |            |  |  |  |
| City: Ceres, CA Phone Number:   | 95307<br>209-531-2088  |   | ices Provided: No                               |                   |            |  |  |  |
| City: Ceres, CA<br>Phone Number:<br>Lingustic capab                     | 95307<br>209-531-2088<br>ilities:                            | Telehealth Serv<br>Accepting New  |   |                   |            |  |  |  |
| City: Ceres, CA Phone Number:<br>Lingustic capab<br>Interpreter service | 95307<br>209-531-2088<br><b>ilities:</b><br>es are available |   |   |                   |            |  |  |  |
| City: Ceres, CA<br>Phone Number:<br>Lingustic capab                     | 95307<br>209-531-2088<br><b>ilities:</b><br>es are available |   |   |                   |            |  |  |  |

| Populations served: Children/Youth.   |  |  |  |              |           |  |  |
|---|--|--|--|--------------|-----------|--|--|
|   |  | Cultural Abilities: Transitional Age Youth, Gay, Bisexual, or Transgender. |  |              |           |  |  |
|   |  | Office Hours: M  | londay - Friday 8:00 am - 4:30 pm                |              |           |  |  |
|   |  | website: www.el  | itefamily.org                                    |              |           |  |  |
|   |  |  |  |              |           |  |  |
|   |  |  |  | License #    | CC and    |  |  |
| Last Name   | First Name   | NPI  | Type of License                                  | and Exp Date | Date      |  |  |
|   |  |  |  | 144569       | Υ         |  |  |
| Abeyta  | David  | 1144074774   | Associate Marriage and Family Therapist          | 1/31/2026    | 7/25/2025 |  |  |
|   |  |  |  | A90262       | Υ         |  |  |
| Bajwa   | Gagandeep  | 1750348025   | Physician and Surgeon                            | 2/28/2027    | 7/25/2025 |  |  |
| Gayle-  |  |  |  | 42766        | Υ         |  |  |
| Anderson  | Elizabeth  | 1972230522   | Licensed Marriage and Family Therapist           | 12/31/2025   | 7/29/2025 |  |  |
|   |  |  |  | 114306       | Υ         |  |  |
| Odeny   | Beatrice   | 1699588160   | Associate Clinical Social Worker                 | 3/31/2026    | 5/28/2025 |  |  |
|   |  |  |  | 118689       | Υ         |  |  |
| Olvers  | Teresa   | 1396864583   | Licensed Marriage and Family Therapist           | 3/31/2026    | 7/28/2025 |  |  |
| Address: 2528 Lo<br>City: Ceres, CA 9<br>Phone Number:2<br>Lingustic capabi<br>Interpreter service<br>for languages oth | 5307<br>209-531-2088<br>ilities:<br>es are available | Telehealth Services Provided: No Accepting New Members: Yes                |  |              |           |  |  |
| ė.  |  | Accepting Children's Health Insurance Program (CHIP) Members? N/A          |  |              |           |  |  |
| O <sup>z</sup>  |  | Populations ser  | ved: Children/Youth.                             |              |           |  |  |
|   |  | <b>Cultural Abilities</b>  | s: Transitional Age Youth, Gay, Bisexual, or Tra | ansgender.   |           |  |  |
|   |  | Office Hours: M  | londay-Friday 8:00am-4:30pm                      |              |           |  |  |
|   |  | website: www.el  | itefamily.org                                    |              |           |  |  |
|   |  |  |  |              |           |  |  |
|   |  |  |  | License #    | CC and    |  |  |
| Last Name   | First Name   | NPI  | Type of License                                  | and Exp Date | Date      |  |  |
|   |  |  |  | 144569       | Υ         |  |  |
| Abeyta  | David  | 1144074774   | Associate Marriage and Family Therapist          |              | 7/25/2025 |  |  |
|   |  |  |  | A90262       | Υ         |  |  |
| Bajwa   | Gagandeep  | 1750348025   | Physician and Surgeon                            | 2/28/2027    | 7/25/2025 |  |  |
| Gayle-  |  | 4070000  | <br>   | 42766        | γ         |  |  |
| Anderson  | Elizabeth  | 19/2230522   | Licensed Marriage and Family Therapist           | 12/31/2025   | 7/29/2025 |  |  |

|  | 1                   | 1  |  | 1                 | 1          |  |  |
|--|---------------------|--|--|-------------------|------------|--|--|
|  |                     |  |  | 114306            | Υ          |  |  |
| Odeny  | Beatrice            | 1699588160   | Associate Clinical Social Worker               | 3/31/2026         | 5/28/2025  |  |  |
|  |                     |  |  | 118689            | Υ          |  |  |
| Olvers   | Teresa              | 1396864583   | Licensed Marriage and Family Therapist         | 3/31/2026         | 7/28/2025  |  |  |
| Program Name:  | Elite Family        | Services/Specia  | Ities/Modalities Program Provides: Individua   | l therapy, Group  | therapy,   |  |  |
| Systems-Scoffield  | d Home #39DD        | Group rehabilitati   | ion, Individual rehabilitation, Case managemen | t, and Medicatior | n support. |  |  |
| Type of Program  | n: MH               |  |  |                   |            |  |  |
| Address: 3213 U  | ranus Drive         |  |  |                   |            |  |  |
| City: Ceres, CA 9  | 95307               |  |  |                   |            |  |  |
| Phone Number:  | 209-531-2088        | Telehealth Servi   | ices Provided: No                              |                   |            |  |  |
| Lingustic capabi   | ilities:            | Accepting New  | Members: Yes                                   |                   |            |  |  |
| Interpreter service  | es are available    |  |  |                   |            |  |  |
| for languages oth  | er than English.    |  |  |                   |            |  |  |
| ė.   |                     | Accepting Child  | ren's Health Insurance Program (CHIP) Men      | nbers? N/A        |            |  |  |
| Or The Control of the |                     |  | ved: Children/Youth.                           |                   |            |  |  |
|  |                     | -  |  | anegondor         |            |  |  |
|  |                     | Cultural Abilities: Transitional Age Youth, Gay, Bisexual, or Transgender. |  |                   |            |  |  |
|  |                     | Office Hours: Monday-Friday 8:00am-4:30pm                                  |  |                   |            |  |  |
|  | T                   | website: www.el  | itefamily.org                                  | T                 |            |  |  |
|  |                     |  |  |                   |            |  |  |
|  |                     |  |  | License #         | CC and     |  |  |
| Last Name  | First Name          | NPI  | Type of License                                | and Exp Date      | Date       |  |  |
|  |                     | 4444074774   |  | 144569            | γ          |  |  |
| Abeyta   | David               | 11440/4//4   | Associate Marriage and Family Therapist        |                   | 7/25/2025  |  |  |
| D - 1  |                     | 4750240025   | District and Conserve                          | A90262            | γ          |  |  |
| Bajwa  | Gagandeep           | 1/50348025   | Physician and Surgeon                          | 2/28/2027         | 7/25/2025  |  |  |
| Gayle-   |                     |  |  | 42766             | Υ          |  |  |
| Anderson   | Elizabeth           | 1972230522   | Licensed Marriage and Family Therapist         | 12/31/2025        | 7/29/2025  |  |  |
| O.L.   | Daal daa            | 4.0000004.00   | Associate Olivical Contal Montal               | 114306            | Υ          |  |  |
| Odeny  | Beatrice            | 1699588160   | Associate Clinical Social Worker               | 3/31/2026         | 5/28/2025  |  |  |
|  |                     |  |  | 118689            | Υ          |  |  |
| Olvers   | Teresa              |  | Licensed Marriage and Family Therapist         | 3/31/2026         | 7/28/2025  |  |  |
| Program Name:  | ~                   | Services/Specia  | Ilties/Modalities Program Provides: Full servi | ce partnership.   |            |  |  |
| Community Progr  | am: Esperanza       |  |  |                   |            |  |  |
| #39BX  |                     |  |  |                   |            |  |  |
| Type of Program: MH<br>Address: 1803 W. March Lane<br>Suites A,C,D, & G  |                     |  |  |                   |            |  |  |
|  |                     |  |  |                   |            |  |  |
|  |                     |  |  |                   |            |  |  |
| City: Stockton, C.   | A 95207             |  |  |                   |            |  |  |
| Phone Number:(   | 209) 636-5353       | Telehealth Serv  | ices Provided: Yes                             |                   |            |  |  |
| Lingustic capabi   | ilities:            | Accepting New  | Members: Yes                                   |                   |            |  |  |
| Interpreter service  |                     |  |  |                   |            |  |  |
| for languages oth  | er than English.    |  |  |                   |            |  |  |
|  | a. a.a.i Liigiloili |  |  |                   |            |  |  |

| Ġ.   |                              | Accepting Child   | dren's Health Insurance Program (CHIP) Men  | nbers? N/A                |                |  |  |
|--|------------------------------|---|---|---------------------------|----------------|--|--|
|  |                              | Populations served: Adults.   |   |                           |                |  |  |
|  |                              | Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |   |                           |                |  |  |
|  |                              | Office Hours: Monday - Friday 8:30 am - 5:00 pm   |   |                           |                |  |  |
|  |                              | website: www.tp   | ocp.org   |                           |                |  |  |
| Last Name  | First Name                   | NPI   | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |
|  |                              |   | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | A78392                    |                |  |  |
| Jahangiri  | Hameed                       | 1497707731  | Medical Doctor  | 9/30/2027                 | Υ              |  |  |
|  |                              |   |   | 11425                     | Υ              |  |  |
| Link   | Autumn                       | 1306483276  | Professional Clinical Counselor   | 4/30/2026                 | 9/24/2024      |  |  |
|  |                              |   |   | 152655                    | Υ              |  |  |
| Moore  | Chermayne                    | 1700396850  | Licensed Marriage and Family Therapist  | 1/31/2027                 | 7/23/2025      |  |  |
| Moreno   | Sheila                       | 1568026540  | Associate Social Worker   | 109900<br>8/31/2025       | Y 11/12/24     |  |  |
|  |                              |   |   | 126311                    | Υ              |  |  |
| Robinson-Mola  | Tambra                       | 1306048657  | Associate Clinical Social Worker  | 9/30/26                   | 2/25/2025      |  |  |
|  |                              |   |   | 28784                     | Υ              |  |  |
| Sorm   | En                           | 1518076249  | Licensed Psychiatric Technician   | 5/31/2027                 | 3/27/2025      |  |  |
|  |                              |   |   | 77405                     | Υ              |  |  |
| Wright   | Kathryn                      | 1245566520  | Licensed Marriage and Family Therapist  | 8/31/2025                 |                |  |  |
| Program Name: 1<br>Youth Center #39<br>Type of Program<br>Address: 3800 C<br>City: Oakland, CA | AY<br>: MH<br>oolidge Avenue | Brokerage/Intens  | Services/Specialties/Modalities Program Provides: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention. |                           |                |  |  |
| Phone Number:(   | 510) 482-2244                | Telehealth Serv   | rices Provided:   |                           |                |  |  |
| Lingustic capabi<br>Interpreter service<br>for languages othe                                  | es are available             | Accepting New   | Accepting New Members: Yes  |                           |                |  |  |
| <u>Ł</u>   |                              | Accepting Child   | dren's Health Insurance Program (CHIP) Men  | nbers?                    |                |  |  |
| <u></u>  |                              |   | rved: Children and Youth.   |                           |                |  |  |
|  |                              | Cultural Abilities: Provides outpatient mental health services.   |   |                           |                |  |  |
|  |                              |   | londay - Friday 8:30 am - 5 pm  |                           |                |  |  |
|  |                              | website: www.fr   |   |                           |                |  |  |
| Last Name  | First Name                   | NPI   | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |
|  |                              | OL  | JT OF COUNTY PROVIDER   |                           |                |  |  |

| 3 #39CB Type of Program: MH Address: 1117 S. Grant Street City: Stockton, CA 95206 Phone Number:(209) 330-7155 Lingustic capabilities: Interpreter services are available for languages other than English.                      |            | Services/Specialties/Modalities Program Provides: Crisis Residential Treatment Program.  Telehealth Services Provided: Yes  Accepting New Members: Yes             |   |                           |                |  |  |  |
|--|------------|--|---|---------------------------|----------------|--|--|--|
| Ġ.   |            |  | dren's Health Insurance Program (CHIP) Men                      | nbers? No                 |                |  |  |  |
|  |            | Populations ser  | rved: Adults.<br>s: Veterans, Lesbian, Gay, Bisexual, or Transg | ender                     |                |  |  |  |
|  |            | Office Hours: 2  | ·   | ender.                    |                |  |  |  |
|  |            |  | odsloveoutreach.com   |                           |                |  |  |  |
| Last Name  | First Name | NPI  | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |  |
|  |            |  |   | 1307056                   |                |  |  |  |
| Alexander  | Nikeya     | 1093284275   | Associate Marriage and Family Therapist                         | 1/31/2026                 | Υ              |  |  |  |
|  |            |  |   | 106474                    |                |  |  |  |
| Thompson   | Victoria   | 1376288134   | Associate Clinical Social Worker                                | 8/31/2027                 | Υ              |  |  |  |
| Program Name: G.L.O.M.A.R.F.<br>4 #39CD<br>Type of Program: MH<br>Address: 8210 Bright Road<br>City: French Camp, CA 95231<br>Phone Number:(209) 330-7155<br>Lingustic capabilities:   |            | Services/Specialties/Modalities Program Provides: Adult Transitional Residential Treatment Program.  Telehealth Services Provided: Yes  Accepting New Members: Yes |   |                           |                |  |  |  |
| Interpreter service for languages other  |            |  |   |                           |                |  |  |  |
| الله المالية ا<br>المالية المالية المالي |            | Accepting Child  | dren's Health Insurance Program (CHIP) Men                      | nbers? No                 |                |  |  |  |
| O.   |            | Populations ser  |   |                           |                |  |  |  |
|  |            | •  | s: Veterans, Lesbian, Gay, Bisexual, or Transg                  | ender.                    |                |  |  |  |
|  |            | Office Hours: 2  | ·   |                           |                |  |  |  |
|  |            | website: www.q   | odsloveoutreach.com   |                           |                |  |  |  |
| Last Name  | First Name | NPI  | Type of License   | License #<br>and Exp Date | CC and<br>Date |  |  |  |
|  |            |  |   | 1307056                   |                |  |  |  |
| Alexander  | Nikeya     | 1093284275   | Associate Marriage and Family Therapist                         |                           | Υ              |  |  |  |
| Thompson   | Victoria   | 1376288134   | Associate Clinical Social Worker                                | 106474<br>8/31/2027       | Υ              |  |  |  |
| тпоппрзоп  | VICTOLIA   | 13/0200134   | ASSOCIATE CITIICAL SOCIAL WOLKER                                | 0/31/2027                 | Í              |  |  |  |

| Program Name: G.L.O.M.A.R.F. 5 #39CC Type of Program: MH Address: 458 Almond Drive City: Lodi, CA 95240 Phone Number:(209) 330-7155 Lingustic capabilities: Interpreter services are available for languages other than English.                       |            | Services/Specialties/Modalities Program Provides: Crisis Residential Treatment Program.  Telehealth Services Provided: Yes Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? No Populations served: Adults.  Cultural Abilities: Veterans, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: 24 hours |  |                           |                |  |
|--|------------|--|--|---------------------------|----------------|--|
|  |            | website: www.go  | odsloveoutreach.com  |                           |                |  |
| Last Name  | First Name | NPI  | Type of License  | License #<br>and Exp Date | CC and<br>Date |  |
|  |            |  |  | 1307056                   |                |  |
| Alexander  | Nikeya     | 1093284275   | Associate Marriage and Family Therapist  |                           | Υ              |  |
| L.   |            |  |  | 106474                    |                |  |
| Thompson   | Victoria   | 1376288134   | Associate Clinical Social Worker  Ities/Modalities Program Provides: Case ma   | 8/31/2027                 | Υ              |  |
| Program Name: Mary Magdalene Community Services Type of Program: MH  Address: 620 N Auora St. Ste #7 City: Stockton, CA 95202 Phone Number:(209) 888-4519 Lingustic capabilities: Interpreter services are available for languages other than English. |            | Telehealth Serv Accepting New Accepting Child Populations ser Cultural Abilitie  | Members: Yes  Iren's Health Insurance Program (CHIP) Men  rved: Adults 18- Older Adults.  s: African American, LGBTQ, TAY, Adults, and | nbers?                    |                |  |
|  |            | Office Hours: M  | londay- Friday 8:00 am - 5:00 pm   |                           |                |  |
|  |            | website: https://v   | www.marymagdalenecs.com  |                           |                |  |
| Last Name  | First Name | NPI  | Type of License  | License #<br>and Exp Date | CC and<br>Date |  |
| Smith  | Tamra      | 1336267608   | Licensed Clinical Social Worker  | 76975                     | Υ              |  |

**Program Name:** Turning Point Community Program- Justicia

#39BY

Type of Program: MH

Address: 1803 W. March Lane

Suites A,C,D, & G

City: Stockton, CA 95207

Phone Number: (209) 636-5353

Lingustic capabilities:

Interpreter services are available for languages other than English.

Services/Specialties/Modalities Program Provides: Full service partnership.

Telehealth Services Provided: Yes

**Accepting New Members:** Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Adults.

**Cultural Abilities:** Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender.

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

website: www.tpcp.org

|   | 1          |            |   | License #    | CC and     |
|---|------------|------------|---|--------------|------------|
| Last Name   | First Name | NPI        | Type of License                           | and Exp Date | Date       |
| -   |            |            |   | A78392       |            |
| Jahangiri   | Hameed     | 1497707731 | Medical Doctor                            | 9/30/2027    | Υ          |
|   |            |            |   | 11425        | Υ          |
| Link  | Autumn     | 1306483276 | Associate Professional Clinical Counselor | 4/30/2026    | 9/24/2024  |
|   |            |            |   | 152655       | Υ          |
| Moore   | Chermayne  | 1700396850 | Licensed Marriage and Family Therapist    | 1/31/2027    | 7/23/2025  |
|   |            |            |   | 109900       |            |
| Moreno  | Sheila     | 1568026540 | Clinical Social Worker                    | 8/31/2025    | Y 11/12/24 |
|   |            |            |   | 126311       | Υ          |
| Robinson-Mola   | Tambra     | 1306048657 | Associate Clinical Social Worker          | 9/30/2026    | 2/25/2025  |
|   |            |            |   | 28784        | Υ          |
| Sorm  | En         | 1518076249 | Licensed Psychiatric Technician           | 5/31/2027    | 3/27/2025  |
|   |            |            |   | 77405        | _          |
| Wright  | Kathryn    | 1245566520 | Licensed Marriage and Family Therapist    | 8/31/2025    | Υ          |
| Drawan Name Latina Consisting/Madelities Drawan Dravides Courseling and assessments |            |            |   |              |            |

Program Name: Latino

Behavioral Health and Recovery

Services #90671

Type of Program: MH

Address: 237 E.Channel Street City:Stockton, CA 95202

**Phone Number:**(209) 444-8910

**Services/Specialties/Modalities Program Provides:** Counseling and case management services.

Telehealth Services Provided: Yes

| Last Name First Name   | Populations se<br>Cultural Abilitie                           | es: Veterans, Older Adults, Lesbian, Gay, Bisex<br>Monday - Friday 8:00 am - 5:00 pm  | ual, or Transgend                       |                |  |  |
|--|---|---|---|----------------|--|--|
| Last Namo Eirst Namo   | Cultural Abilitie Office Hours: N                             | es: Veterans, Older Adults, Lesbian, Gay, Bisex<br>Monday - Friday 8:00 am - 5:00 pm<br>org   | License #                               |                |  |  |
| Last Namo Eirst Namo   | Office Hours: N   | Monday - Friday 8:00 am - 5:00 pm   | License #                               |                |  |  |
| Last Namo Eirst Namo   | www.elconcilio.c  | org   |   | CC and         |  |  |
| Last Namo Eirst Namo   |   |   |   | CCond          |  |  |
| Last Namo Eirst Namo   | NPI   | Type of License   |   | CC and         |  |  |
| Last Name First Name   |   |   | and Exp Date                            | CC and<br>Date |  |  |
| Bridge Bryce   | 1164864104  | Licensed Marriage and Family Therapist  | 109827<br>10/31/26                      | Υ              |  |  |
| Drapper<br>Satterfield Katie   | 1194586941  | Associate Clinical Social Worker  | 128141<br>2/28/2027                     | Y<br>5/14/2025 |  |  |
| Perez Nicole   | 1093289613  | Associate Professional Clinical Counselor   | 6828<br>8/31/2025                       | Y<br>5/14/2025 |  |  |
| #9043 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204                     |   | Mental Health Services; Crisis Intervention   |   |                |  |  |
| Phone Number:(209) 464-5519  | Telehealth Services Provided: Accepting New Members: Yes      |   |   |                |  |  |
| Lingustic capabilities:<br>Interpreter services are available<br>for languages other than English. |   |   |   |                |  |  |
| Ŀ  | Accepting Children's Health Insurance Program (CHIP) Members? |   |   |                |  |  |
|  | •   | Populations served: Adults.  Cultural Abilities: Provides socialization, vocational, and educational opportunities for Adult  |   |                |  |  |
|  | Mentally ill bene   |   | • |                |  |  |
|  | Office Hours: N   | Office Hours: Monday - Friday 8:00 am - 5:00 pm   |   |                |  |  |
|  | website: https://   | /www.sjcbhs.org/adult.aspx#martin_gipson_cen  | ter                                     |                |  |  |
| Last Name First Name   | NPI   | Type of License   | License #                               | CC and         |  |  |
| Last Name   First Name   |   | Type of License ON LICENSED STAFF ONLY  | and Exp Date                            | Date           |  |  |
| Program Name: Parents By<br>Choice #39BL<br>Type of Program: MH                                    | Services/Speci<br>Coordination (IC                            | Services/Specialties/Modalities Program Provides: Case Management, Intensive Care Coordination (ICC), Mental Health Services including Intensive Home-Based Services (IHBS), and Crisis Intervention. |   |                |  |  |

| Address:306 E Main St. Suite 300 City: Stockton, CA 95202 Phone Number:(209)478-4554 Lingustic capabilities: Interpreter services are available for languages other than English. |  | Telehealth Services Provided: Yes Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Children/Youth.  Cultural Abilities: Transitional Age Youth.  Office Hours: Monday-Friday 9:00 am - 5:00 pm website: www.parentsbychoice.net |  |                                |                     |  |  |
|---|--|---|--|--------------------------------|---------------------|--|--|
| Last Name   | First Name                                     | NPI   | Type of License                            | License #<br>and Exp Date      | CC and<br>Date      |  |  |
| Hunter  | Krys   | 1386838100  | Psychologist                               | 21375<br>8/31/2026             | N                   |  |  |
| Lo  | Christopher                                    | 1891463345  | Associate Social Worker                    | 125655<br>9/30/2026            | Y<br>2/22/2025      |  |  |
| Resendez  | Ashley Laing                                   | 1366901134  | Associate Social Worker                    | 112695<br>12/31/2025<br>122353 | Y<br>2/11/2025<br>Y |  |  |
| Ruiz Velasco  | Johanna  | 1548041114  | Associate Clinical Social Worker           | 5/31/2026                      | 7/24/2025           |  |  |
| Program Name: I<br>Folsom Sacramer<br>Type of Program<br>Address: 9343 To<br>Drive #110<br>City: Sacramento   | nto #39CQ<br>:: MH<br>ech Center<br>, CA 95826 | Services/Specialties/Modalities Program Provides: Individual and Group Therapy and Rehab by a professional.   |  |                                |                     |  |  |
| Phone Number:(4   | ,  | Telehealth Serv   | rices Provided: Yes                        |                                |                     |  |  |
| Lingustic capabi<br>Interpreter service<br>for languages other  | es are available                               | Accepting New Members: Yes  |  |                                |                     |  |  |
| Ė   |  | Accepting Child   | dren's Health Insurance Program (CHIP) Mem | nbers? No                      |                     |  |  |
|   |  | Populations ser   | rved: Adults.                              |                                |                     |  |  |
|   |  | Cultural Abilities: Older Adults, Lesbian, Gay, Bisexual, or Transgender.   |  |                                |                     |  |  |
|   |  | Office Hours: Monday Friday 7:30 am-6:00 pm   |  |                                |                     |  |  |
|   |  | website: www.p  | synergy.org                                | <u> </u>                       |                     |  |  |
| Last Name   | First Name                                     | NPI   | Type of License                            | License #<br>and Exp Date      | CC and<br>Date      |  |  |
|   |  | 00  | OF COUNTY PROVIDER                         |                                |                     |  |  |

|                                    |             |  |  | 65194                 | Υ                 |  |  |
|------------------------------------|-------------|--|--|-----------------------|-------------------|--|--|
| Abbott                             | Kristi      | 1053574202   | Licensed Clinical Social Worker                | 5/31/2027             | 12/16/202         |  |  |
|                                    |             |  |  | A99238                | , ,               |  |  |
| Abram Pan                          | Wentao      | 1225666928   | Medical Doctor                                 | 4/30/2027             | Y 8/8/2024        |  |  |
|                                    |             |  |  | 111807                | Υ                 |  |  |
| Balbi                              | Miranda     | 1891249926   | Licensed Marriage and Family Therapist         | 2/28/2027             | 8/19/2025         |  |  |
|                                    |             |  |  | 119980                |                   |  |  |
| Clark                              | Juli        | 1376971143   | Associate Marriage and Family Therapist        | 7/31/2026             | Y 2/8/2025        |  |  |
|                                    |             |  |  | 19262                 | Υ                 |  |  |
| DeLoney                            | Tyicia      | 1447096425   | Associate Professional Social Worker           | 7/31/2026             | 7/19/2025         |  |  |
|                                    |             |  |  | 149802                |                   |  |  |
| Her                                | Alyssa      | 1184397838   | Licensed Marriage and Family Therapist         | 9/31/2025             | Y 11/13/24        |  |  |
|                                    |             |  |  | 8361                  |                   |  |  |
| Jacques                            | Adrian      | 1629541446   | Associate Professional Clinical Counselor      | 8/31/2025             | Y 6/2/2025        |  |  |
| <b>l</b>                           |             |  |  | 14360                 | Υ                 |  |  |
| Johnson                            | Stephanie   | 1730369950   | Associate Professional Clinical Counselor      | 7/31/2026             | 5/11/2025         |  |  |
| Mendoza-                           | Flanantina  | 4 4075 45 677  | Associate Clinical Casial Waylor               | 100362                | Y<br>= /4.4./2025 |  |  |
| Jimenez                            | Florentina  | 1497545677   | Associate Clinical Social Worker               | 5/31/2026<br>20A20161 | 5/11/2025<br>v    |  |  |
| Moore                              | Jacob       | 1255892287   | Medical Doctor                                 | 6/30/2026             | 4/29/2025         |  |  |
| WIOOTE                             | Jacob       | 1233832287   | Wedical Boctor                                 | 141807                | 4/23/2023         |  |  |
| Palacio                            | Alex        | 1952123853   | Associate Marriage and Family Therapist        | 10/31/2025            | Y 10/31/24        |  |  |
| - dideio                           | / IICX      | 1332123033   | 7.535clate Walflage and Falliny Merapise       | A99238                | 1 10/31/24        |  |  |
| Pan                                | Abram       | 1225666928   | Medical Doctor                                 | 4/30/2027             | Y 8/8/2024        |  |  |
| i un                               | / Wildin    | 1223000320   | Twedted Botton                                 | 708103                | V                 |  |  |
| Pragasa                            | Sheryll     | 1770101735   | Licensed Vocational Nurse                      | 5/31/2027             | 1/16/2025         |  |  |
| Tugusu                             | Sileryii    | 1770101733   | Licensed Vocational Warse                      | 739406                | 1, 10, 2023       |  |  |
| Rascoe                             | Kymayla     | 1487363248   | Licensed Vocational Nurse                      | 1/31/2026             | Y 6/2/2025        |  |  |
|                                    | , ,         |  |  | 723573                | , ,               |  |  |
| Sanders                            | Laurel      | 1235911942   | Licensed Vocational Nurse                      | 8/31/2025             | Y 9/1/2025        |  |  |
|                                    |             |  |  | 109181                | Υ                 |  |  |
| Schwedler                          | Grace       | 1215658117   | Associate Social Worker                        | 7/31/2025             | 5/30/2025         |  |  |
| Program Name:                      | Psynergy -  | Services/Specia  | alties/Modalities Program Provides: Individua  | and Group The         | erapy and         |  |  |
| Sacramento #390                    | , ,,        | Rehab by a professional.   |  |                       |                   |  |  |
| Type of Program                    | n: MH       |  |  |                       |                   |  |  |
| Address: 9343 Tech Center          |             |  |  |                       |                   |  |  |
| Drive #110                         |             |  |  |                       |                   |  |  |
| City: Sacramento                   | o. CA 95826 |  |  |                       |                   |  |  |
| Phone Number: (408) 465-8280       |             | Telehealth Serv  | rices Provided: Yes                            |                       |                   |  |  |
| Lingustic capabilities:            |             | Accepting New  |  |                       |                   |  |  |
| Interpreter services are available |             | , loooping HeW   |  |                       |                   |  |  |
| for languages oth                  |             |  |  |                       |                   |  |  |
|                                    |             | Accepting Children's Health Insurance Program (CHIP) Members? No |  |                       |                   |  |  |
| Ġ.                                 |             | riocopting office  | a.o o riodiai inodianoo i rogidin (orini ) men |                       |                   |  |  |

| <b>-</b>       |                  | Populations se            | rved: Adults.                                    |              |            |  |
|----------------|------------------|---------------------------|--|--------------|------------|--|
|                |                  | · ·                       | es: Older Adults, Lesbian, Gay, Bisexual, or Tra | ansgender    |            |  |
|                |                  |                           | Monday-Friday 7:30 am-6:00 pm                    | inogonaor.   |            |  |
|                |                  | website: www.psynergy.org |  |              |            |  |
|                |                  |                           |  |              |            |  |
|                |                  |                           |  | License #    | CC and     |  |
| Last Name      | First Name       | NPI                       | Type of License                                  | and Exp Date |            |  |
| zast reame     | i ii se i taille |                           | JT OF COUNTY PROVIDER                            | and Exp Date | Dute       |  |
|                |                  |                           |  | 65194        |            |  |
| Abbott         | Kristi           | 1053574202                | Licensed Clinical Social Worker                  | 5/31/2027    | Y 12/16/25 |  |
|                |                  |                           |  | 111807       | Y          |  |
| Balbi          | Miranda          | 1891249926                | Licensed Marriage and Family Therapist           | 2/28/2027    | 8/19/2025  |  |
|                |                  |                           |  | 119980       |            |  |
| Clark          | Juli             | 1376971143                | Associate Marriage and Family Therapist          | 7/31/2026    | Y 2/8/2025 |  |
|                |                  |                           |  | 19262        | Υ          |  |
| DeLoney        | Tyicia           | 1447096425                | Associate Professional Social Worker             | 7/31/2026    | 7/19/2025  |  |
|                |                  |                           |  | 149802       |            |  |
| Her            | Alyssa           | 1184397838                | Licensed Marriage and Family Therapist           | 9/30/2025    | Y 11/13/24 |  |
|                |                  |                           |  | 8361         |            |  |
| Jacques        | Adrian           | 1629541446                | Associate Professional Clinical Counselor        | 8/31/2026    | Y 6/2/2025 |  |
|                |                  |                           |  | 14360        | Υ          |  |
| Johnson        | Stephanie        | 1730369950                | Associate Professional Clinical Counselor        | 7/31/2026    | 5/11/2025  |  |
| Mendoza-       |                  |                           |  | 100362       | Υ          |  |
| Jimenez        | Florentina       | 1497545677                | Associate Clinical Social Worker                 | 5/31/2026    | 5/11/2025  |  |
|                |                  |                           |  | 20A20161     | Υ          |  |
| Moore          | Jacob            | 1255892287                | Medical Doctor                                   | 6/30/2026    | 4/29/2025  |  |
|                |                  |                           |  | 141807       |            |  |
| Palacio        | Alex             | 1952123853                | Associate Marriage and Family Therapist          | 10/31/2025   | Y 10/31/24 |  |
|                |                  |                           |  | A99238       |            |  |
| Pan            | Abram            | 1225666928                | Medical Doctor                                   | 4/30/2027    | Y 8/8/2024 |  |
|                |                  |                           |  | 708103       | Υ          |  |
| Pragasa        | Sheryll          | 1770101735                | Licensed Vocational Nurse                        | 5/31/2027    | 1/16/2025  |  |
|                |                  |                           |  | 739406       |            |  |
| Rascoe         | Kymayla          | 1487363248                | Licensed Vocational Nurse                        | 1/31/2026    | Y 6/2/2025 |  |
|                |                  |                           |  | 723573       |            |  |
| Sanders        | Laurel           | 1235911942                | Licensed Vocational Nurse                        | 8/31/2027    | Y 9/1/2025 |  |
|                |                  |                           |  | 109181       | Υ          |  |
| Schwedler      | Grace            | 1215658117                | Associate Social Worker                          | 7/31/2026    | 5/30/2025  |  |
| Program Name   |                  | •                         | alties/Modalities Program Provides: Case Ma      |              | erage;     |  |
| Sacramento - C |                  | Mental Health S           | ervices; Crisis Intervention; Medication Suppor  | t.           |            |  |
| Type of Progra | ım: MH           |                           |  |              |            |  |

| Address: 4604A             | A Roosevelt       |                             |   |               |            |  |  |
|----------------------------|-------------------|-----------------------------|---|---------------|------------|--|--|
| Avenue                     |                   |                             |   |               |            |  |  |
| City: Sacramento, CA 95820 |                   |                             |   |               |            |  |  |
| Phone Number:              | ` '               |                             | rices Provided: Yes   |               |            |  |  |
| Lingustic capak            |                   | Accepting New               | Members: Yes  |               |            |  |  |
| Interpreter services       | her than English. |                             |   |               |            |  |  |
|                            | ner than English. | 4 (1 01 11                  |   | 1 0 N         |            |  |  |
| F                          |                   |                             | dren's Health Insurance Program (CHIP) Men  | nbers? No     |            |  |  |
|                            |                   | Populations se              |   | ander .       |            |  |  |
|                            |                   |                             | es: Older Adults, Lesbian, Gay, Bisexual, or Trai   | isgender.     |            |  |  |
|                            |                   | website:www.ps              | Monday-Friday 7:30 am-6:00 pm   |               |            |  |  |
|                            |                   | website.www.ps              | syrietgy.org  | 1             |            |  |  |
|                            |                   |                             |   | License #     | CC and     |  |  |
| Last Name                  | First Name        | NPI                         | Type of License   | and Exp Date  | Date       |  |  |
| Lust Hume                  | Thist italie      |                             | JT OF COUNTY PROVIDER   | and Exp Date  | Dute       |  |  |
|                            |                   |                             |   | 147057        | Υ          |  |  |
| Allen                      | Coleen            | 1518601418                  | Associate Marriage and Family Therapist   |               | 8/26/2025  |  |  |
|                            |                   |                             | , accessing the second | 127309        | Υ          |  |  |
| Arnett                     | Melissa           | 1215325386                  | Associate Marriage and Family Therapist   | 6/30/2027     | 5/29/2025  |  |  |
|                            |                   |                             | , , , , , ,   | 147057        | Υ          |  |  |
| Bhullar                    | Annitra           | 1639712508                  | Associate Marriage and Family Therapist   | 5/31/2026     | 5/20/2025  |  |  |
|                            |                   |                             | , ,   | 130335        | γ          |  |  |
| De La Cruz                 | Noah              | 1497424733                  | Licensed Clinical Social Worker   | 5/31/2027     | 3/10/2025  |  |  |
|                            |                   |                             |   | 99754         |            |  |  |
| Delgado                    | Justin            | 1720676893                  | Associate Clinical Social Worker  | 1/31/2026     | Y 3/9/2025 |  |  |
| 0.0                        |                   |                             |   | 76696         | Y          |  |  |
| Fowler                     | Ben               | 1801156567                  | Licensed Clinical Social Worker   | 9/30/2026     | 1/16/2025  |  |  |
|                            |                   |                             |   | A124058       | Υ          |  |  |
| Phenco                     | Julie             | 1154520708                  | Medical Doctor  | 7/31/2026     | 1/12/2025  |  |  |
| Program Name:              | : Psynergy        | Services/Speci              | alties/Modalities Program Provides: Individua   | and Group The | rapy and   |  |  |
| Greenfield Providence      | der - #39CZ       | Rehab by a prof             | essional.   | •             |            |  |  |
| Type of Progran            | m: MH             |                             |   |               |            |  |  |
| Address: 215 H             | uerta Avenue      |                             |   |               |            |  |  |
| City: Greenfield,          |                   |                             |   |               |            |  |  |
| Phone Number: 408-465-8280 |                   |                             | vices Provided: Yes   |               |            |  |  |
| Lingustic capabilities:    |                   | Accepting New               | Members: Yes  |               |            |  |  |
| •                          | ces are available |                             |   |               |            |  |  |
| ior languages of           | her than English. |                             |   |               |            |  |  |
| Ġ.                         |                   |                             | dren's Health Insurance Program (CHIP) Men  | nbers? No     |            |  |  |
|                            |                   | Populations served: Adults. |   |               |            |  |  |

|  |                 | Cultural Abilitie  | s: Older Adults, Lesbian, Gay, Bisexual, or Trai  | nsgender.                    |                     |
|--|-----------------|--|---|------------------------------|---------------------|
|  |                 | Office Hours:  | Monday- Friday 7:30 am-6:00 pm  |                              |                     |
|  |                 | website:www.ps   | ynergy.org  |                              |                     |
| Last Name  | First Name      | NPI  | Type of License   | License #<br>and Exp Date    | CC and<br>Date      |
|  |                 | OU   | T OF COUNTY PROVIDER  | I                            |                     |
| Aquino   | Cindy Ma        | 1043684095   | Licensed Vocational Nurse   | 291024<br>9/30/2025          | Y 2/1/2025          |
|  | Noah            | 1497424733   | Associate Clinical Social Worker  | 103458<br>5/31/2027          | Y<br>2/24/2025      |
| Leigh-<br>Brampton   | Ricki           | 1487964755   | Medical Doctor  | A119619<br>9/30/2027         | Y 6/2/2025          |
| Ochoa  | Karen           | 1841188513   | Licensed Vocational Nurse   | 750628<br>9/30/2026          | Y<br>6/28/2025      |
| Valicenti<br>Villalobos-   | James           | 1336812098   | Associate Clinical Social Worker  | 127194<br>11/30/24<br>144243 | Y 4/2/2025          |
|  | Angela          | 1992394357   | Associate Marriage and Family Therapist   |                              | Y 11/17/24          |
| Program Name: Psynergy Morgan Hill Provider - #39CY Type of Program: MH Address: 18217 Hale Avenue City: Morgan Hill, CA 95037 Phone Number: 408-465-8280 Lingustic capabilities: Interpreter services are available for languages other than English. |                 | Accepting New  Accepting Child  Populations ser  Cultural Abilitie | ices Provided: Yes Members: Yes Iren's Health Insurance Program (CHIP) Memored: Adults. s: Older Adults, Lesbian, Gay, Bisexual, or Train onday- Friday 7:30 am-6:00 pm |                              |                     |
| Last Name  | First Name      | NPI  | Type of License   | License #<br>and Exp Date    | CC and<br>Date      |
| Last Ivallie   | i ii st ivallic |  | T OF COUNTY PROVIDER  | and Exp Date                 | Date                |
| Briggs   | Heather         | 1447643168   | Licensed Marriage and Family Therapist  | 82437<br>8/31/2026<br>16563  | Y<br>1/17/2025<br>Y |
| Downs  | Courtney        | 1316778293   | Associate Professional Clinical Counselor   | 5/31/2026                    | 8/14/2024           |
| Kent   | Sharon          | 1518445501   | Associate Professional Clinical Counselor   | 15905<br>2/28/2026           | Y<br>1/31/2025      |

| Montogomery Spini Anne 1588078208 Medical Doctor 10/31/2026 1/25/2025 14373 7/30/2027 Y 7/7/2025 20A11309 1821291030 Medical Doctor 10/31/2026 Y 7/2/2025 39331 Y 8/31/2026 17/2025 39331 Y 8/31/2026 17/2/2025 3932 39321 Y 8/31/2026 17/2/2025 3932 39321 39 |                     | 1                | 1   | T  | A127216            | Υ            |  |  |
|--|---------------------|------------------|---|--|--------------------|--------------|--|--|
| Montogomery   Spini   Anne   1588078208   Medical Doctor   7/30/2027   7/7/2025   20A11309   20A11309   10/31/2026   7/7/2025   20A11309   10/31/2026   20A11309   10/31/2026   20A11309   10/31/2026   20A11309   10/31/2026   20A11309   10/31/2025   20A11309   10/31/2026   20A11309   10/31/2025   20A11309   10/31/2026   20A11309   10/31/2026   20A11309   2   | Lilly               | Matthew          | 1346571643  | Medical Doctor                                   |                    | -            |  |  |
| Spini  | •                   | IVIACCITEVV      | 1340371043  | Wedlear Boetor                                   |                    | 1/23/2023    |  |  |
| Romando Mary-Joe 1821291030 Medical Doctor 20A11309 10/31/2026 77/2/2025 39331 Y 1265588545 Licensed Marriage and Family Therapist 8/31/2026 1/17/2025 1/17/ |                     | Anne             | 1588078208  | Medical Doctor                                   |                    | Y 7/7/2025   |  |  |
| Romando Mary-Joe 1821291030 Medical Doctor 10/31/2026 V 7/2/2025 39331 Y Scheibley Dawn 1265588545 Licensed Marriage and Family Therapist 8/31/2026 1/1/2025 14/1/2025 Monica 1679238042 Associate Professional Clinical Counselor V 7/2/2025 Program Name: San Joaquin Connect III FSP #39CO Type of Program: MH Address: 4545 Georgelown Place, Sultie F-30 City: Stockton, CA 95207-6215 Phone Number: (209) 269-5587 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults. Cultural Ablitities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday - Friday 8:30 am - 5 pm website: www.telecarecorp.com  Last Name First Name NPI Type of License and Exp Date 22945 Y Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 1205663895 Vocational Nurse 5/311/2027 7/11/2025 Associate Clinical Social Worker 11/30/2025 Y 5/6/2025 Associate Clinical Social Worker 10/31/25 Y 7/5/2025 Program Name: Telecare (aka Jeremy House) #39AX Type of Program: MH   | <b>5</b> p          | 7                | 1333373233  | Wedled Botto                                     |                    | . 77772023   |  |  |
| Scheibley   Dawn   1265588545   Licensed Marriage and Family Therapist   R/31/2026   1/17/2025   1/1   | Romando             | Marv-Joe         | 1821291030  | Medical Doctor                                   |                    | Y 7/2/2025   |  |  |
| Scheibley   Dawn   1265588545   Licensed Marriage and Family Therapist   8/31/2026   1/17/2025   |                     |                  |   |  |                    |              |  |  |
| Services   Specialties   Modalities   Program   Provides   Case   Management   Brokerage   Including   Intensive   Care   Coordination   (ICC); Mental Health   Services   Including   Intensive   Home   Based   Services   (IHBS); Medication   Support; Crisis   Intervention.  | Scheibley           | Dawn             | 1265588545  | Licensed Marriage and Family Therapist           |                    | 1/17/2025    |  |  |
| including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention.  Address: 4545 Georgetown Place, Suite F-30 City: Stockton, CA 95207-6215 Phone Number: (209) 269-5587 Lingustic capabilities: Interventer services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am - 5 pm website: www.telecarecorp.com  License # CC and and Exp Date Date Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 195296908 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 195296908 Nurse Practitioner 9/31/2027 7/11/2025 Bominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025 Bominguez Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025 Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025 Program Name: Telecare (aka Jeremy House) #39AX Type of Program: MH  | Velez               | Monica           | 1679238042  | Associate Professional Clinical Counselor        |                    | Y 7/2/2025   |  |  |
| Home Based Services (IHBS); Medication Support; Crisis Intervention.  Home Based Services (IHBS); Medication Support; Crisis Intervention.  Telephone Number: (209) 269-5587  Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Aguilar Shelly 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | Program Name:       | San Joaquin      | Services/Speci  | alties/Modalities Program Provides: Case M       | anagement/ Brok    |              |  |  |
| Address: 4545 Georgetown Place, Suite F-30 City: Stockton, CA 95207-6215 Phone Number: (209) 269-5587 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes  Accepting New Members: Accepting New Accepting New Accepting New Accepting New Accepti | _                   | •                | including Intensi   | ve Care Coordination (ICC); Mental Health Ser    | vices including Ir | ntensive     |  |  |
| City: Stockton, CA 95207-6215 Phone Number: (209) 269-5587 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday - Friday 8:30 am- 5 pm website: www.telecarecorp.com  License # CC and and Exp Date Date  License # CC and and Exp Date Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX Type of Program: MH   | Type of Program     | n: MH            | Home Based Se   | ervices (IHBS); Medication Support; Crisis Inter | vention.           |              |  |  |
| City: Stockton, CA 95207-6215 Phone Number: (209) 269-5587 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm website: www.telecarecorp.com  License # CC and and Exp Date Date Program Served: Adults Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm Website: www.telecarecorp.com  License # CC and Date Date Date Date Date Date Date Date  | Address: 4545 G     | Georgetown       |   |  |                    |              |  |  |
| Telehealth Services Provided: Yes Accepting New Members: Yes Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday - Friday 8:30 am-5 pm website: www.telecarecorp.com  License # CC and and Exp Date Date Date Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 195296908 Nurse Practitioner 2/28/2026 3/12/2025 Aguilar Shelly 1255153169 Registered Nurse 11/30/26 8/27/2025 Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025 Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025 Program Name: Telecare (aka Jeremy House) #39AX Type of Program: MH  | Place, Suite F-30   | J                |   |  |                    |              |  |  |
| Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am-5 pm  website: www.telecarecorp.com  License # CC and and Exp Date Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  | City: Stockton, C   | A 95207-6215     |   |  |                    |              |  |  |
| Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # CC and and Exp Date Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | Phone Number:(      | (209) 269-5587   | Telehealth Serv   | vices Provided: Yes                              |                    |              |  |  |
| for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # CC and and Exp Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/2945 Y  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  | Lingustic capab     | ilities:         | Accepting New Members: Yes  |  |                    |              |  |  |
| Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # CC and and Exp Date Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Aguilar Shelly 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  | Interpreter service | es are available |   |  |                    |              |  |  |
| Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday - Friday 8:30 am- 5 pm website: www.telecarecorp.com  License # CC and and Exp Date Date Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025 Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025 Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025 Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025 Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025 Program Name: Telecare (aka Jeremy House) #39AX Type of Program: MH   | for languages oth   | er than English. |   |  |                    |              |  |  |
| Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # CC and Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | Ŀ                   |                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A |  |                    |              |  |  |
| Office Hours: Monday - Friday 8:30 am- 5 pm  website: www.telecarecorp.com  License # CC and and Exp Date Date  Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  |                     |                  | Populations served: Adults.                                       |  |                    |              |  |  |
| website: www.telecarecorp.com           Last Name         First Name         NPI         Type of License         License # and Exp Date Date         CC and Date           Aguilar         Shelly         1952969008         Nurse Practitioner         2/28/2026         3/12/2025           Dominguez         Kristen         1205663895         Vocational Nurse         5/31/2027         7/11/2025           Hayes         Morackot         1255153169         Registered Nurse         11/30/26         8/27/2025           Lorenz         Arthur         1477603249         Licensed Marriage and Family Therapist         11/30/2025         Y 5/6/2025           Williams         Tyresha         1588160865         Associate Clinical Social Worker         10/31/25         Y 7/5/2025           Program Name: Telecare (aka Jeremy House) #39AX           Type of Program: MH   |                     |                  | · · · · · · · · · · · · · · · · · · ·                             |  |                    |              |  |  |
| License # CC and and Exp Date  |                     |                  | Office Hours: N   | Monday - Friday 8:30 am- 5 pm                    |                    |              |  |  |
| Last Name First Name NPI Type of License and Exp Date 22945 Y Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   |                     |                  | website: www.te   | elecarecorp.com                                  |                    |              |  |  |
| Last Name First Name NPI Type of License and Exp Date 22945 Y Aguilar Shelly 1952969008 Nurse Practitioner 2/28/2026 3/12/2025  Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/205 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   |                     |                  |   |  |                    |              |  |  |
| Aguilar   Shelly   1952969008   Nurse Practitioner   2/28/2026   3/12/2025   721186   Y  |                     |                  |   |  | License #          | CC and       |  |  |
| Aguilar         Shelly         1952969008         Nurse Practitioner         2/28/2026         3/12/2025           Dominguez         Kristen         1205663895         Vocational Nurse         5/31/2027         7/11/2025           Hayes         Morackot         1255153169         Registered Nurse         11/30/26         8/27/2025           Lorenz         Arthur         1477603249         Licensed Marriage and Family Therapist         11/30/2025         Y 5/6/2025           Williams         Tyresha         1588160865         Associate Clinical Social Worker         10/31/25         Y 7/5/2025           Program Name: Telecare (aka Jeremy House) #39AX           Type of Program: MH  | Last Name           | First Name       | NPI   | Type of License                                  | and Exp Date       | Date         |  |  |
| Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  |                     |                  |   |  | 22945              | Υ            |  |  |
| Dominguez Kristen 1205663895 Vocational Nurse 5/31/2027 7/11/2025  Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  | Aguilar             | Shelly           | 1952969008  | Nurse Practitioner                               | · · ·              | 3/12/2025    |  |  |
| Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   |                     |                  |   |  |                    | •            |  |  |
| Hayes Morackot 1255153169 Registered Nurse 11/30/26 8/27/2025  Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | Dominguez           | Kristen          | 1205663895  | Vocational Nurse                                 |                    |              |  |  |
| Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  |                     |                  |   |  |                    | •            |  |  |
| Lorenz Arthur 1477603249 Licensed Marriage and Family Therapist 11/30/2025 Y 5/6/2025  Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH  | Hayes               | Morackot         | 1255153169  | Registered Nurse                                 |                    | 8/27/2025    |  |  |
| Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | <b>[</b> .          | <b>.</b>         | 4.477.0000.00   | [  |                    | V = /6/222=  |  |  |
| Williams Tyresha 1588160865 Associate Clinical Social Worker 10/31/25 Y 7/5/2025  Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   | Lorenz              | Arthur           | 14//603249  | Licensed Marriage and Family Therapist           |                    | Y 5/6/2025   |  |  |
| Program Name: Telecare (aka Jeremy House) #39AX  Type of Program: MH   |                     |                  |   |  |                    |              |  |  |
| Jeremy House) #39AX  Type of Program: MH   |                     | <u> </u>         |   |  |                    |              |  |  |
| Type of Program: MH  | _                   | •                | Services/Speci  | alties/Modalities Program Provides: Crisis Re    | esidential Treatm  | ent Program. |  |  |
|  | ,                   |                  |   |  |                    |              |  |  |
| Address: 5634 Jeremy Way   |                     |                  |   |  |                    |              |  |  |
|  | Address: 5634 J     | eremy Way        |   |  |                    |              |  |  |

City: Stockton, CA 95212 Phone Number: (209) 888-4969 Telehealth Services Provided: No Lingustic capabilities: Accepting New Members: Yes Interpreter services are available for languages other than English. Accepting Children's Health Insurance Program (CHIP) Members? N/A Ġ Populations served: Adults. Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. Office Hours: 8:30 am - 5:00 pm website: www.telecarecorp.com License # CC and Last Name First Name NPI Type of License and Exp Date Date 117921 9/30/2025 Hardin Marcelliese 1417459512 Υ Associate Social Worker 36454 8/31/2025 Huynh Thuy 1033485495 Licensed Psychiatric Technician Services/Specialties/Modalities Program Provides: Case Management/ Brokerage Program Name: Telecare Early Intervention Recovery Services including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support. (TEIRS) #39B2 Type of Program: MH Address: 4545 Georgetown Place, Suite A3 City:Stockton, CA 95207 Phone Number: (209) 955-1139 Telehealth Services Provided: Yes Lingustic capabilities: Accepting New Members: Yes Interpreter services are available for languages other than English. Accepting Children's Health Insurance Program (CHIP) Members? N/A E Populations served: Children/Youth and Adults. Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday - Friday 8:30 am - 5:00 pm website: https://www.telecarecorp.com/teir License # CC and Last Name **First Name** NPI Type of License and Exp Date Date 22945 2/28/2026 Aguilar Shelly 1093239436 Nurse Practitioner 155166 Alonzo Tiffany 1720707193 Licensed Marriage and Family Therapist 5/31/2027 Υ 144592 Associate Marriage and Family Therapist |1/31/2026 Υ Costello Courtney 1639843659

| Program Nai | Program Name: Telecare San |            | alties/Modalities Program Provides: Case Ma | nagement/ Brok        | erage |
|-------------|----------------------------|------------|---|-----------------------|-------|
| Russell     | David                      | 1477167666 | Nurse Practitioner                          | 95039943<br>1/31/2026 | Υ     |
| Palaca      | Anthony                    | 1144971060 | Licensed Clinical Social Worker             | 5/31/2027             | Υ     |
|             |                            |            |   | 130411                |       |
| Nelson      | Tonya                      | 1932483385 | Licensed Psychiatric Technician             | 4/30/2027             | Υ     |
|             |                            |            |   | 26756                 | -     |
| Hill        | Mikeala                    | 1841082880 | Associate Professional Clinical Counselor   | 15208<br>11/30/25     | γ     |
| Flores      | Destiny                    | 1306659263 | Licensed Vocational Nurse                   | 734315<br>5/31/2027   | Y     |

Program Name: Telecare San Joaquin Connect I #39BZ Type of Program: MH

Address: 4545 Georgetown Place, Suite D & E-28

**City:** Stockton, CA 95207-6215 **Phone Number:**(209) 269-5587

Lingustic capabilities:

F

Interpreter services are available for languages other than English.

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

Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Adults.

Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.

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

website: www telecarecorp.com

|           |            | Website. www.te | alecatecorp.com                           |                           |                |
|-----------|------------|-----------------|---|---------------------------|----------------|
| Last Name | First Name | NPI             | Type of License                           | License #<br>and Exp Date | CC and<br>Date |
|           |            |                 |   | 721186                    | Υ              |
| Dominguez | Kristen    | 1205663895      | Vocational Nurse                          | 5/31/2027                 | 7/11/2025      |
|           |            |                 |   | 806387                    | Υ              |
| Hayes     | Morackot   | 1255153169      | Registered Nurse                          | 11/30/2026                | 8/27/2025      |
|           |            |                 |   | 45350                     |                |
| Lorenz    | Arthur     | 1477603249      | Licensed Marriage and Family Therapist    | 11/30/25                  | Y 5/6/2025     |
|           |            |                 |   | 104609                    | Υ              |
| Monroy    | Aldo       | 1700354719      | Associate Clinical Social Worker          | 10/31/2025                | 8/26/2025      |
|           |            |                 |   | 95015254                  | Υ              |
| Russell   | David      | 1477167666      | Nurse Practitioner                        | 1/31/2026                 | 8/26/2025      |
|           |            |                 |   | 13809                     | Υ              |
| Van Ness  | JohnMark   | 1679237861      | Associate Professional Clinical Counselor | 4/30/2026                 | 5/28/2025      |

**Program Name:** Telecare San Joaquin Connect II #39CA

Type of Program: MH
Address: 4545 Georgetown
Place, Suite D & E-28

**City:** Stockton, CA 95207-6215 **Phone Number:**(209) 269-5587

Lingustic capabilities:

Interpreter services are available for languages other than English.

for languages other tha

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

Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Adults.

Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.

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

website: www.telecarecorp.com

|           |            |            |   | License #    | CC and     |
|-----------|------------|------------|---|--------------|------------|
| Last Name | First Name | NPI        | Type of License                           | and Exp Date | Date       |
|           |            |            |   | 721186       | Υ          |
| Dominguez | Kristen    | 1205663895 | Vocational Nurse                          | 5/31/2027    | 7/11/2025  |
|           |            |            |   | 806387       | Υ          |
| Hayes     | Morackot   | 1255153169 | Registered Nurse                          | 11/30/2026   | 8/27/2025  |
|           |            |            |   | 45350        |            |
| Lorenz    | Arthur     | 1477603249 | Licensed Marriage and Family Therapist    | 11/30/25     | Y 5/6/2025 |
|           |            |            |   | 104609       | Υ          |
| Monroy    | Aldo       | 1700354719 | Associate Clinical Social Worker          | 10/31/2025   | 8/26/2025  |
|           |            |            |   | 95015254     | Υ          |
| Russell   | David      | 1477167666 | Nurse Practitioner                        | 1/31/2026    | 8/26/2025  |
|           |            |            |   | 13809        | Υ          |
| Van Ness  | JohnMark   | 1679237861 | Associate Professional Clinical Counselor | 4/30/2026    | 5/28/2025  |

**Program Name:** Turning Point Community Program - Sage

Village I #39DN

Type of Program: MH

Address: 7224 S. Recovery Road

**City:** French Camp, CA 95231 **Phone Number:**(209) 888-6595

EXT 5

Lingustic capabilities:

Interpreter services are available for languages other than English.

Services/Specialties/Modalities Program Provides: Transitional Adult Residential Treatment, Psychosocial and therapeutic groups, Individual and Group Counseling, Crisis Intervention, Onsite and Offsite Activities, Client Advocacy, Assistance with Developing Community Support Systems, Pre-Vocational/Vocational Counseling, Substance Use Recovery Treatment, treatment and discharge planning, 24/7 staff support, and medication stabilization.

Telehealth Services Provided: Yes

**Accepting New Members:** Yes

| Ė   |            | Accepting Chil  | dren's Health Insurance Program (CHIP) Men                                 | nbers? No                 |                |  |   |  |
|---|------------|---|--|---------------------------|----------------|--|---|--|
|   |            | Populations served: Adults.   |  |                           |                |  |   |  |
|   |            | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.   |  |                           |                |  |   |  |
|   |            |   | Monday - Friday 8:00am-4:30pm  |                           |                |  |   |  |
|   |            | website: https:/  | /www.tcp.org/program/sage-village/   |                           |                |  |   |  |
| Last Name   | First Name | NPI   | Type of License  | License #<br>and Exp Date | CC and<br>Date |  |   |  |
| Abbasi  | Kafia      | 1215114897  | Physician and Surgeon  | A113195<br>6/30/2026      | N              |  |   |  |
| Ceja  | Isabel     | 1881170074  | Licensed Vocational Nurse  | 735997<br>4/30/2027       | N              |  |   |  |
| Colbert   | Donna      | 1831770163  | Adult Residential Facilities   | 6075818735<br>12/11/26    | N              |  |   |  |
|   |            |   |  | 40338                     | N              |  |   |  |
| Fuller  | Kenya      | 1063256139  | Licensed Psychiatric Technician  | 10/31/26<br>746151        | N              |  |   |  |
| Grewal  | Harsimran  | 1710877873  | Licensed Vocational Nurse  | 12/31/25<br>C175390       | N              |  |   |  |
| Hartman   | Bonnie     | 1861470197  | Physician and Surgeon  | 11/30/2025<br>37510       | N              |  |   |  |
| Mbithi  | Ruth       | 1740042233  | Licensed Psychiatric Technician  | 9/30/2025<br>11270        |                |  |   |  |
| Payton  | Geoffrey   | 1942899521  | Associate Professional Clinical Counselor Substance Use Disorder Certified | 3/31/2026<br>6987         | N              |  |   |  |
| Spiller   | Janelle    | 1033382221  | Counselor II   | 9/1/2025<br>136414        | N              |  |   |  |
| Varela  | Wendy      | 1154832830  | Associate Marriage and Family Therapist                                    | 12/31/2025                | N              |  |   |  |
| Program Name: Turning Point Community Program - Sage Village II #39DP Type of Program: MH  Address:7236 S. Recovery Road City: French Camp, CA 95231 Phone Number: (209) 888-6595 EXT 6 |            | Services/Specialties/Modalities Program Provides: Transitional Adult Residential Treatment, Psychosocial and therapeutic groups, Individual and Group Counseling, Crisis Intervention, Onsite and Offsite Activities, Client Advocacy, Assistance with Developing Community Support Systems, Pre-Vocational/Vocational Counseling, Substance Use Recovery Treatment, treatment and discharge planning, 24/7 staff support, and medication stabilization.  Telehealth Services Provided: Yes |  |                           |                |  |   |  |
|   |            |   |  |                           |                |  | • | abilities:<br>vices are available<br>other than English. |
| F   |            |   |  |                           |                |  |   |  |
|   |            | Populations served: Adults.   |  |                           |                |  |   |  |
|   |            | Cultural Abilition  | es: Veterans, Older Adults, Lesbian, Gay, Bisex                            | ual, or Transgend         | ler.           |  |   |  |

|   |  | Office Hours: M  | onday-Friday 8:00 am-4:30 pm   |                           |                |  |
|---|--|--|--|---------------------------|----------------|--|
|   |  | website: https://v   |  |                           |                |  |
| Last Name   | First Name   | NPI  | Type of License  | License #<br>and Exp Date | CC and<br>Date |  |
|   |  |  |  | A113195                   |                |  |
| Abbasi  | Kafia  | 1215114897   | Physician and Surgeon  | 6/30/2026                 | N              |  |
|   |  |  |  | 735997                    |                |  |
| Ceja  | Isabel   | 1881170074   | Licensed Vocational Nurse  | 4/30/2027                 | N              |  |
|   |  |  |  | 6075818735                |                |  |
| Colbert   | Donna  | 1831770163   | Adult Residential Facilities   | 12/11/2026                | N              |  |
|   |  |  |  | 40338                     |                |  |
| Fuller  | Kenya  | 1063256139   | Licensed Psychiatric Technician  | 10/31/26                  | N              |  |
|   |  |  |  | 746151                    |                |  |
| Grewal  | Harsimran  | 1710877873   | Licensed Vocational Nurse  | 12/31/2025                | N              |  |
|   |  |  |  | C175390                   |                |  |
| Hartman   | Bonnie   | 1861470197   | Physician and Surgeon  | 11/30/2025                | N              |  |
|   |  |  |  | 37510                     |                |  |
| Mbithi  | Ruth   | 1740042233   | Licensed Psychiatric Technician  | 9/30/2025                 | N              |  |
|   |  |  |  | 11270                     |                |  |
| Payton  | Geoffrey   | 1942899521   | Associate Professional Clinical Counselor  | 3/31/2026                 | N              |  |
|   |  |  | Substance Use Disorder Certified   | 6987                      |                |  |
| Spiller   | Janelle  | 1033382221   | Counselor II   | 9/1/2025                  | N              |  |
|   |  |  |  | 136414                    |                |  |
| Varela  | Wendy  | 1154832830   | Associate Marriage and Family Therapist  | 12/31/2025                | N              |  |
| Community Cou<br>(VCCS) (Mante<br>Type of Progra<br>Address:129 E<br>City: Manteca, | Program Name: Valley Community Counseling Services (VCCS) (Manteca) #9040 Type of Program: MH Address:129 E. Center Street City: Manteca, CA 95336 |  | Ilties/Modalities Program Provides: Individua<br>n Development, ICC/IHBS, rehab, Medication S  |                           | •              |  |
| Phone Number  | r:(209) 239-5553   | Telehealth Serv  | ices Provided: Yes   |                           |                |  |
| Lingustic capa  | abilities:   | Accepting New  | Members: Yes   |                           |                |  |
| Interpreter serv  | ices are available   |  |  |                           |                |  |
| for languages o   | ther than English.   |  |  |                           |                |  |
| <b>E</b> .  |  | Accepting Child  | ren's Health Insurance Program (CHIP) Men  | nbers? No                 |                |  |
| <b>-</b>  |  | Populations served: Children/Youth.  |  |                           |                |  |
|   |  |  | s: Transitional Age Youth, Lesbian, Gay, Bisex   | ual or Transgeno          | ler            |  |
|   |  |  | onday-Friday 8:00 am- 5:00 pm Closed: 12pm   |                           |                |  |
|   |  | website: https://www.valleycommunitycounselingservices.org   |  |                           |                |  |
|   |  | The state of the s | and the second s |                           |                |  |

|                     |                  |  |   | License #          | CC and     |  |  |  |
|---------------------|------------------|--|---|--------------------|------------|--|--|--|
| Last Name           | First Name       | NPI  | Type of License                                 | and Exp Date       | Date       |  |  |  |
|                     |                  |  | April 1   | 39580              |            |  |  |  |
| Amancio             | Isabel           | 1194868695   | Licensed Marriage and Family Therapist          | 5/31/2026          | Y 12/24/24 |  |  |  |
|                     |                  |  |   | 141967             | Υ          |  |  |  |
| Garcia              | Odalis           | 1669169561   | Associate Marriage and Family Therapist         | 10/31/2025         | 3/31/2025  |  |  |  |
|                     |                  |  |   | A112447            | Υ          |  |  |  |
| Hira Brar           | Shabneet         | 1851598452   | Physician                                       | 4/30/2026          | 3/14/2025  |  |  |  |
|                     |                  |  |   | C53847             | Υ          |  |  |  |
| Kamran              | Muhammad         | 1811051337   | Physician                                       | 2/28/2027          | 8/21/2025  |  |  |  |
|                     |                  |  |   | 152389             | Υ          |  |  |  |
| Martin              | Brittney         | 1366130635   | Associate Marriage and Family Therapist         | 12/31/2025         | 7/11/2025  |  |  |  |
|                     |                  |  |   | 154834             | Υ          |  |  |  |
| Munford             | Kashmere         | 1437911872   | Associate Marriage and Family Therapist         | 4/30/2026          | 3/13/2025  |  |  |  |
|                     |                  |  |   | 155365             | Υ          |  |  |  |
| Navarro             | Jessica          | 1083344790   | Licensed Marriage and Family Therapist          | 5/31/2027          | 4/17/2025  |  |  |  |
|                     |                  |  | , ,   |                    |            |  |  |  |
|                     |                  |  |   | 135970             | Υ          |  |  |  |
| Pena                | Adriana          | 1295253797   | Associate Marriage and Family Therapist         | 11/30/2025         | 7/11/2025  |  |  |  |
| Viles-Reed          | Teresa           | 1386762623   | Psychologist                                    | 14848<br>8/31/2027 | Y 11/13/24 |  |  |  |
| Program Name:       |                  |  | · ·   |                    | -          |  |  |  |
| Community Couns     | •                | Services/Specialties/Modalities Program Provides: Individual/family/group/plan development/assessment/collateral /rehab/Case Management/ Brokerage including |   |                    |            |  |  |  |
| (VCCS) (School E    | ~                | •  | oordination (ICC); Mental Health Services inclu | _                  | _          |  |  |  |
| Stockton) #9042     |                  | Services (IHBS); Medication Support; Crisis Intervention.  |   |                    |            |  |  |  |
| Type of Program     |                  | ,  | ,   |                    |            |  |  |  |
| Address: 6707 E     |                  |  |   |                    |            |  |  |  |
| Drive, Suite A      |                  |  |   |                    |            |  |  |  |
| City: Stockton, Ca  | A 95219          |  |   |                    |            |  |  |  |
| Phone Number:(      |                  | Telehealth Services Provided: Yes  |   |                    |            |  |  |  |
| Lingustic capabi    | •                | Accepting New  | Members: Yes                                    |                    |            |  |  |  |
| Interpreter service |                  |  |   |                    |            |  |  |  |
| for languages oth   | er than English. |  |   |                    |            |  |  |  |
| & ·                 |                  | Accepting Children's Health Insurance Program (CHIP) Members? No   |   |                    |            |  |  |  |
|                     |                  |  | Populations served: Children/Youth.             |                    |            |  |  |  |
|                     |                  | Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender.  |   |                    |            |  |  |  |
|                     |                  |  | 00 am - 5:00 pm, Closed 12:00 pm- 1:00pm        |                    |            |  |  |  |
|                     |                  | website: https://v   | www.valleycommunitycounselingservices.org       | 1                  |            |  |  |  |
|                     |                  |  |   |                    | CC = 14    |  |  |  |
| Lock Norses         | Finat Name       | NDI  | Turno of License                                | License #          | CC and     |  |  |  |
| Last Name           | First Name       | NPI  | Type of License                                 | and Exp Date       | Date       |  |  |  |

|                                 | 1                | ı   | 1  | 1425070            |                |  |  |
|---------------------------------|------------------|---|--|--------------------|----------------|--|--|
| Dono                            | Advisos          | 1205252707  | Associate Marriage and Family Therenist                            | 135970             | Y<br>7/11/2025 |  |  |
| Pena                            | Adriana          | 1295253797  | Associate Marriage and Family Therapist                            | 11/30/25<br>14848  | 7/11/2025      |  |  |
| Viles-Reed                      | Teresa           | 1386762623  | Psychologist   | 8/31/27            | Y 11/13/24     |  |  |
| Program Name:                   | Valley           | Services/Speci  | alties/Modalities Program Provides: Case Ma                        | nagement/ Brok     | erage          |  |  |
| Community Cour                  | nseling Services | including Intensi   | ve Care Coordination (ICC); Mental Health Ser                      | vices including Ir | ntensive       |  |  |
| (VCCS) (Tracy) #                | 9041             | Home Based Se   | rvices (IHBS); Medication Support; Crisis Interv                   | vention.           |                |  |  |
| Type of Program                 | n: MH            |   |  |                    |                |  |  |
| Address: 19 Eas                 | t 6th Street     |   |  |                    |                |  |  |
| City: Tracy, CA 9               |                  |   |  |                    |                |  |  |
| Phone Number:(                  | •                |   | vices Provided: Yes  |                    |                |  |  |
| Lingustic capab                 |                  | Accepting New   | Members: Yes   |                    |                |  |  |
| Interpreter service             |                  |   |  |                    |                |  |  |
| for languages oth               | er than English. |   |  |                    |                |  |  |
| Ġ.                              |                  | Accepting Child   | dren's Health Insurance Program (CHIP) Men                         | nbers? No          |                |  |  |
|                                 |                  | Populations se  | rved: Children/Youth.  |                    |                |  |  |
|                                 |                  | Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |  |                    |                |  |  |
|                                 |                  | Office Hours: Monday - Friday 8:00 am - 5:00 pm, Closed 12:00pm-1:00pm              |  |                    |                |  |  |
|                                 |                  | website: https://   | /www.valleycommunitycounselingservices.org                         |                    |                |  |  |
|                                 |                  |   |  |                    |                |  |  |
| Last Name                       | F' N             | ALD!  | T (11  | License #          | CC and         |  |  |
| Last Name                       | First Name       | NPI   | Type of License  | and Exp Date       | Date           |  |  |
|                                 |                  |   |  | 39580              | Υ              |  |  |
| Amancio                         | Isabel           | 1194868695  | Licensed Marriage and Family Therapist                             | 5/31/2026          | 12/24/24       |  |  |
|                                 |                  |   |  | 127214             | Υ              |  |  |
| Cervantes                       | Rosemary         | 1407299738  | Licensed Marriage and Family Therapist                             | 7/31/2027          | 11/9/2024      |  |  |
|                                 | ,                |   | , , ,  | A112447            | Y              |  |  |
| Hira Brar                       | Shabneet         | 1851598452  | Physician  | 4/30/2026          | 3/14/2025      |  |  |
|                                 |                  |   |  | C53847             | Υ              |  |  |
| Kamran                          | Muhammad         | 1811051337  | Physician  | 2/28/2027          | 8/21/2025      |  |  |
|                                 |                  |   |  | 135970             | Υ              |  |  |
| Pena                            | Adriana          | 1295253797  | Associate Marriage and Family Therapist                            | 11/30/25           | 7/11/2025      |  |  |
|                                 |                  |   |  | 117685             | Υ              |  |  |
| Roy                             | Reshma           | 1073061784  | Licensed Clinical Social Worker                                    | 8/31/2027          | 4/4/2025       |  |  |
| Viles-Reed                      | Tamass           | 1206762622  | Dough alogist  | 14848              | V 11 /12 /24   |  |  |
|                                 | Teresa           | 1386762623  | Psychologist   | 8/31/2027          | Y 11/13/24     |  |  |
| Program Name:<br>Community Supp |                  |   | alties/Modalities Program Provides: Provides and in the community. | outpatient ment    | ai nealtí      |  |  |
| (VCSS) #9063                    | OIL OCIVICES     | 361 VICES III-IIUIII  | and in the community.  |                    |                |  |  |
| Type of Program                 | n: MH            |   |  |                    |                |  |  |
| Address: 2495 W. March Lane     |                  |   |  |                    |                |  |  |
| Address: 2/105 \/               | / March Lane     |   |  |                    |                |  |  |

City: Stockton, CA 95207
Phone Number: (209) 465-1080
Lingustic capabilities:
Interpreter services are available

Telehealth Services Provided: Yes

Accepting New Members: Yes

for languages other than English.

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Children/Youth.

Cultural Abilities: Transitional Age Youth, Lesbian, Bisexual, or Transgender.

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

website:www.victor.org

|           | 1           | website:www.victor.org |   |                           |                |  |  |
|-----------|-------------|------------------------|---|---------------------------|----------------|--|--|
| Last Name | First Name  | NPI                    | Type of License                           | License #<br>and Exp Date | CC and<br>Date |  |  |
|           |             |                        |   | 125000                    |                |  |  |
| Abdullahi | Krissie     | 1407307762             | Associate Marriage and Family Therapist   | 3/31/2026                 | Υ              |  |  |
|           |             |                        |   | 118662                    | Υ              |  |  |
| Allen     | Laterra     | 1285290346             | Associate Clinical Social Worker          | 10/31/2025                | 7/29/2024      |  |  |
|           |             |                        |   | 12381                     |                |  |  |
| Bhangu    | Simran      | 1740765338             | Associate Professional Clinical Counselor | 2/28/2027                 | Y 8/5/2024     |  |  |
|           |             |                        |   | 146517                    | Υ              |  |  |
| Binder    | Tiya        | 1457071581             | Associate Marriage and Family Therapist   | 4/30/2025                 | 7/31/2024      |  |  |
|           |             |                        |   | A117416                   | Υ              |  |  |
| Chang     | Christine   | 1669632451             | Physician                                 | 11/30/2026                | 2/18/2025      |  |  |
|           |             |                        |   | 20A12207                  | Υ              |  |  |
| Chee      | Christopher | 1447480173             | Physician                                 | 12/31/2026                | 7/31/2023      |  |  |
|           |             |                        |   | 149250                    | Υ              |  |  |
| Cortina   | Jonathan    | 173087492              | Associate Marriage and Family Therapist   | 8/31/2025                 | 1/23/2025      |  |  |
|           |             |                        |   | 44160                     | Υ              |  |  |
| Dadkhah   | Betia       | 1083709380             | Licensed Marriage and Family Therapist    | 2/28/2026                 | 6/13/2024      |  |  |
|           |             |                        |   | 126404                    | Υ              |  |  |
| DeAvellar | Alejandra   | 1427836790             | Associate Clinical Social Worker          | 9/30/2025                 | 8/14/2024      |  |  |
|           |             |                        |   | 86206                     | Υ              |  |  |
| Kooger    | Giana       | 1720318132             | Licensed Marriage and Family Therapist    | 3/31/2027                 | 8/17/2022      |  |  |
|           |             |                        |   | 112928                    | Υ              |  |  |
| Langham   | Kathryn     | 1598925901             | Physician                                 | 11/30/2025                | 7/29/2024      |  |  |
|           |             |                        |   |                           | Υ              |  |  |
| McCowan   | Lee         | 1063110286             | Executive Director                        | NA                        | 4/24/2025      |  |  |
|           |             |                        |   | 124533                    |                |  |  |
| Nunes     | Grace       | 1023848736             | Associate Clinical Social Worker          | 7/31/2026                 | Y 8/6/2024     |  |  |
|           |             |                        |   | 15432                     | Υ              |  |  |
| Pandey    | Mia         | 1437563384             | Licensed Professional Clinical Counselor  | 1/31/2026                 | 7/30/2024      |  |  |

100731 3/31/2026

125730 9/30/2025

118299 9/30/2025

117453

127682

8/31/2025

8/31/2025

Y 8/2/2024

7/19/2024

Y 9/3/2024

8/31/2025

Υ

4/15/2025

|   |   |   |   | 16624              | Υ              |  |  |
|---|---|---|---|--------------------|----------------|--|--|
| Rodriguez   | Maria   | 1003123241  | Licensed Professional Clinical Counselor  | 5/31/2026          | 7/19/2024      |  |  |
| Program Name<br>Community Sup<br>Manteca #39Co<br>Type of Progra<br>Address:302 C<br>City: Manteca, | oport Services -<br>G<br>am: MH<br>Cherry Lane          | including Intens  | alties/Modalities Program Provides:Case Ma<br>ive Care Coordination (ICC); Mental Health Ser<br>ervices (IHBS); Medication Support; Crisis Inter- | vices including Ir | Ŭ              |  |  |
| _   | r:(209)647-6200   | Telehealth Ser  | vices Provided: Yes   |                    |                |  |  |
| •   | abilities:<br>ices are available<br>other than English. | Accepting New   | Members: Yes  |                    |                |  |  |
| Ġ.  | _   | Accepting Children's Health Insurance Program (CHIP) Members? N/A                   |   |                    |                |  |  |
| CL  |   | Populations served: Children/Youth.   |   |                    |                |  |  |
|   |   | Cultural Abilities: Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |   |                    |                |  |  |
|   |   | Office Hours:   | Monday - Friday 8:00 am - 5:00 pm   |                    |                |  |  |
|   |   | website: www.victor.org   |   |                    |                |  |  |
| Last Name   | First Name  | NPI   | Type of License   | License #          | CC and<br>Date |  |  |
|   |   |   | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | 17437              | Υ              |  |  |
| Andrede   | Clarissa  | 1487222907  | Associate Professional Clinical Counselor   | 9/30/25            | 4/30/2025      |  |  |
|   |   |   |   | 125730             | Y              |  |  |
| Chavez  | Merlin  | 1649788860  | Associate Marriage and Family Therapist   | 5/31/2026          | 7/22/2024      |  |  |
|   |   |   |   | 20A12207           | Υ              |  |  |
| Chee  | Christopher   | 1447480173  | Physician   | 12/31/2026         | 7/31/2023      |  |  |
|   |   |   |   | 99791              | Υ              |  |  |
| Diaz  | Claudia   | 1275810442  | Licensed Marriage and Family Therapist  | 12/31/25           | 7/31/2024      |  |  |
|   |   |   |   | 132326             | Y              |  |  |
| Ifeanyi   | Jimmy   | 1679189724  | Associate Marriage and Family Therapist   | 4/30/2026          | 7/31/2025      |  |  |
| L .   |   |   |   | 112928             | Υ              |  |  |
| Langham   | Kathryn   | 1598925901  | Physician   | 11/30/25           | 7/29/2024      |  |  |

Associate Clinical Social Worker

Associate Clinical Social Worker

Associate Clinical Social Worker

Associate Clinical Social Worker

Licensed Marriage and Family Therapist

Lopez

Manzo

Martinez

McNichols

Radford

Mike

Kiara

April

Kemisha

Elizabeth

1356813182

1528543964

1669955407

1184361693

1376082974

|                     |                  |  |  | 115647            |              |  |  |
|---------------------|------------------|--|--|-------------------|--------------|--|--|
| Seefeldt            | Jacquelyn        | 1124250204   | Licensed Marriage and Family Therapist           | 9/30/2025         | Y 7/8/2024   |  |  |
|                     | Kayla            |  |  | 15348             | Υ            |  |  |
| Segal               | Kayla            | 1114614559   | Associate Professional Clinical Counselor        | 12/31/2025        | 7/15/2024    |  |  |
|                     |                  |  |  | 92259             |              |  |  |
| Simpson             | Michelle         | 1780214478   | Associate Clinical Social Worker                 | 10/31/2025        | Y 8/5/2024   |  |  |
| Contract Psychi     | atric Hospitals  |  |  |                   |              |  |  |
| Program Name:       | BHC Heritage     | Services/Specia  | alties/Modalities Program Provides: Psychiat     | ric Inpatient Hos | pital.       |  |  |
| Oaks Hospital       |                  |  |  |                   |              |  |  |
| Type of Program     | : MH             |  |  |                   |              |  |  |
|                     |                  |  |  |                   |              |  |  |
| Address: 4250 A     | uburn Boulevard  |  |  |                   |              |  |  |
| City: Sacramento    |                  |  |  |                   |              |  |  |
| Phone Number:(      | 916) 489-3336    | Telehealth Serv  | rices Provided:                                  |                   |              |  |  |
| Lingustic capabi    |                  | Accepting New  | Members: Yes                                     |                   |              |  |  |
| Interpreter service |                  |  |  |                   |              |  |  |
| for languages oth   | er than English. |  |  |                   |              |  |  |
| Ė                   |                  | Accepting Children's Health Insurance Program (CHIP) Members? Yes.                 |  |                   |              |  |  |
|                     |                  | Populations served: Children/Youth and Adults.                                     |  |                   |              |  |  |
|                     |                  | Cultural Abilities: Interpreter Services available for language other than English |  |                   |              |  |  |
|                     |                  | Office Hours: 24   | 4/7  |                   |              |  |  |
|                     |                  | website: https://h   | neritageoakshospital.com/                        |                   |              |  |  |
|                     |                  |  |  |                   |              |  |  |
|                     |                  |  |  | License #         | CC and       |  |  |
| Last Name           | First Name       | NPI  | Type of License                                  | and Exp Date      | Date         |  |  |
|                     | 7110 01          |  | Out of County Hospital                           |                   |              |  |  |
| Program Name:       | BHC Sierra       | Services/Specia  | alties/Modalities Program Provides: Psychiat     | ric Inpatient Hos | pital.       |  |  |
| Vista Hospital      |                  |  |  |                   |              |  |  |
| Type of Program     |                  |  |  |                   |              |  |  |
| Address:48001 E     |                  |  |  |                   |              |  |  |
| City: Sacramento    |                  |  |  |                   |              |  |  |
| Phone Number:       | · · ·            | Telehealth Services Provided:  |  |                   |              |  |  |
| Lingustic capabi    |                  | Accepting New Members: Yes   |  |                   |              |  |  |
| Interpreter service |                  |  |  |                   |              |  |  |
| for languages oth   | er than English. |  |  |                   |              |  |  |
| F                   |                  | Accepting Children's Health Insurance Program (CHIP) Members? Yes                  |  |                   |              |  |  |
|                     |                  | <u> </u>   | rved: Children/Youth and Adults.                 |                   |              |  |  |
|                     |                  |  | es: Veterans, Older Adults, Transitional Age You | uth, Lesbian, Ga  | y, Bisexual, |  |  |
|                     |                  | or Transgender.  |  |                   |              |  |  |
|                     |                  | Office Hours: 24   |  |                   |              |  |  |
|                     |                  |  | sierravistahospital.com/                         |                   |              |  |  |

|                                       |                  |   |   | License #          | CC and      |  |  |
|---------------------------------------|------------------|---|---|--------------------|-------------|--|--|
| Last Name                             | First Name       | NPI   | Type of License                                 | and Exp Date       | Date        |  |  |
|                                       |                  | (   | Out of County Hospital                          |                    |             |  |  |
| Program Name: /                       | Adventist        | Services/Specia   | Ities/Modalities Program Provides: Psychiati    | ric Inpatient Hosp | ital.       |  |  |
| Health Vallejo                        |                  |   | •   |                    |             |  |  |
| Type of Program                       | : MH             |   |   |                    |             |  |  |
| Address: 525 Oregon Street            |                  |   |   |                    |             |  |  |
| City: Vallejo, CA 9                   | 94590            |   |   |                    |             |  |  |
| Phone Number:(7                       | 707) 648-2200    | Telehealth Serv   | ices Provided:                                  |                    |             |  |  |
| Lingustic capabi                      | •                | Accepting New   | Members: Yes                                    |                    |             |  |  |
| Interpreter service                   | s are available  |   |   |                    |             |  |  |
| for languages othe                    | er than English. |   |   |                    |             |  |  |
| Ė                                     |                  | Accepting Child   | ren's Health Insurance Program (CHIP) Mem       | nbers? Yes.        |             |  |  |
|                                       |                  | Populations ser   | ved: Children/Youth and Adults.                 |                    |             |  |  |
|                                       |                  | Cultural Abilitie   | s: Veterans, Older Adults, Transitional Age You | ıth, Lesbian, Gay  | , Bisexual, |  |  |
|                                       |                  | or Transgender.   |   |                    |             |  |  |
|                                       |                  | Office Hours: 2   | 4/7   |                    |             |  |  |
|                                       |                  | website:https://w   | ww.adventisthealth.org/locations/adventist-hea  | lth-vallejo/       |             |  |  |
|                                       |                  |   |   |                    |             |  |  |
|                                       |                  |   |   | License #          | CC and      |  |  |
| Last Name                             | First Name       | NPI   | Type of License                                 | and Exp Date       | Date        |  |  |
| D                                     | ۸ -۱ ۱: - ۱      | •   | Out of County Hospital                          | :- lt't            | 14 - 1      |  |  |
| Program Name: //<br>Health St. Helena | Adventist        | Services/Specia   | Ities/Modalities Program Provides: Psychiate    | ric inpatient Hosp | itai.       |  |  |
| Type of Program                       | - M⊔             |   |   |                    |             |  |  |
| Address: 10 Woo                       |                  |   |   |                    |             |  |  |
| City: St. Helena, (                   |                  |   |   |                    |             |  |  |
| Phone Number:                         |                  | Telehealth Serv   | ices Provided:                                  |                    |             |  |  |
| Lingustic capabi                      | •                | Accepting New Members: Yes  |   |                    |             |  |  |
| Interpreter service                   |                  |   |   |                    |             |  |  |
| for languages othe                    |                  |   |   |                    |             |  |  |
| Ŀ                                     |                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A.                          |   |                    |             |  |  |
|                                       |                  | Populations served: Adults.   |   |                    |             |  |  |
|                                       |                  | Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, |   |                    |             |  |  |
|                                       |                  | Cultural Abilitie   | s: Veterans, Older Adults, Transitional Age You | ıth, Lesbian, Gay  | , Bisexual, |  |  |
|                                       |                  | or Transgender.   |   | ıth, Lesbian, Gay  | , Bisexual, |  |  |
|                                       |                  | or Transgender.  Office Hours: 2  | 4/7   | ith, Lesbian, Gay  | , Bisexual, |  |  |
|                                       |                  | or Transgender.  Office Hours: 2  |   | ith, Lesbian, Gay  | , Bisexual, |  |  |
|                                       |                  | or Transgender.  Office Hours: 2  | 4/7   |                    |             |  |  |
|                                       | Final Name       | or Transgender.  Office Hours: 2  website:https://w   | 4/7<br>/ww.adventisthealth.org/st.helena/       | License #          | CC and      |  |  |
| Last Name                             | First Name       | or Transgender.  Office Hours: 2 website:https://w  | 4/7   |                    |             |  |  |

| Type of Program: MH Address: 39001 Sundale Drive City: Fremont, CA 94538 Phone Number:(510)756-3108 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes    Accepting Children's Health Insurance Program (CHIP) Members?   Populations served: Children/Youth and Adults.   Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbia or Transgender.   Office Hours: 24/7   website: https://fremonthospital.com/ |  | Members?   |   |                         |                   |  |
|--|--|--|---|-------------------------|-------------------|--|
| Last Name  | First Name   | NPI  | Type of License Out of County Hospital    | License #<br>and Exp Da | CC and<br>te Date |  |
| Program Name: Sehavioral Health Type of Program Address: 1287 For City: Santa Rosa, Phone Number: ( Lingustic capabi Interpreter services for languages other  | care Hospital : MH ulton Road CA 95401 707)800-7700 lities: es are available | Services/Special Telehealth Services   |   | chiatric Inpatient H    | ospital.          |  |
| E.   |  | Accepting Children's Health Insurance Program (CHIP) Members? Yes Populations served: Children/Youth and Adults.  Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay Bisexual, or Transgender.  Office Hours: 24/7  website: https://norcalbehavioral.com/ |   |                         |                   |  |
| Last Name  | First Name   | NPI  | Type of License<br>Out of County Hospital | License #<br>and Exp Da | CC and<br>te Date |  |
| Program Name: 3<br>Behavioral Health<br>Type of Program<br>Address: 2510 N<br>City: Stockton, C/   | Center<br>: MH<br>California St.   |  | alties/Modalities Program Provides: Psyc  | hiatric Inpatient H     | ospital.          |  |

| Phone Number:(209)461-2000   |                   | Telehealth Services Provided:   |  |                        |                |  |  |
|--|-------------------|---|--|------------------------|----------------|--|--|
| Lingustic capabilities: Interpreter services are available for languages other than English.   |                   | Accepting New Members: Yes  |  |                        |                |  |  |
| Ġ.   |                   | Accepting Chil  | dren's Health Insurance Program (CHIP) Mei                 | mbers? N/A             |                |  |  |
| <b>0</b> 1   |                   | Populations se  | •                    |                        |                |  |  |
|  |                   | Cultural Abilitie   | es: Veterans, Older Adults, Lesbian, Gay, Bise             | cual, or Transgen      | der.           |  |  |
|  |                   | Office Hours:   | 24/7   |                        |                |  |  |
|  |                   | website: https://www.dignityhealth.org/central-california/locations/stjosephsbeha                           |  |                        |                |  |  |
| Last Name  | First Name        | NPI   | Type of License  | License # and Exp Date | CC and<br>Date |  |  |
|  |                   |   |  |                        |                |  |  |
|  | SE DISORDER SE    |   | DER DIRECTORY alties/Modalities Program Provides: Outpatie |                        |                |  |  |
| Program Name: Chemical Dependency Counseling Center (CDCC)  Type of Program: SUD Address: 620 N. Aurora St. Suite City: Stockton, CA 95202 |                   | treatment.  |  |                        |                |  |  |
| Phone Number:  |                   | Telehealth Services Provided: Yes   |  |                        |                |  |  |
| Lingustic capal  | •                 | Accepting New Members: Yes  |  |                        |                |  |  |
| Interpreter service  |                   |   |  |                        |                |  |  |
| · ·  | her than English. |   |  |                        |                |  |  |
| <del>ل</del> ے ٌ   | J                 | Accepting Children's Health Insurance Program (CHIP) Members? N/A   |  |                        |                |  |  |
| C.   |                   | Populations served: Children/Youth and Adults.  |  |                        |                |  |  |
|  |                   | Cultural Abilities: Veterans, Older Adults, Transitional Age Youth, Lesbian, Gay, Bisexual, or Transgender. |  |                        |                |  |  |
|  |                   | 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 # and Exp Date | CC and<br>Date |  |  |
|  |                   |   |  | 14319                  |                |  |  |
| Brown  | Tome              | 1346134368  | Registered Substance Abuse Counselor                       | 6/29/2026              | Y 6/5/2025     |  |  |
|  |                   |   |  | 10568                  | Υ              |  |  |
| Cunningham   | Robin             | 1154951242  | Certified Substance Abuse Counselor                        | 11/18/2026             | 5/31/2023      |  |  |
|  |                   |   |  | 11857                  | Υ              |  |  |
| Galiza   | Marie             | 1326742495  | Certified Substance Abuse Counselor                        | 9/26/2026              | 7/11/2025      |  |  |
|  |                   |   |  | 6675                   | Y              |  |  |
| Jackson  | Selena            | 1386810208  | Certified Substance Abuse Counselor                        | 4/1/2026               | 7/15/2025      |  |  |

|   |  |   |  | 14329   | Υ               |  |
|---|--|---|--|---|-----------------|--|
| Lewandowski   | Carla                                  | 1659078137  | Registered Substance Abuse Counselor   | 11/18/27  | 7/11/2025       |  |
|   |  |   |  | Aii53050318   | Υ               |  |
| Martin  | Rebecca                                | 1447671581  | Certified Substance Abuse Counselor  | 8/2/2026  | 8/28/2018       |  |
|   |  |   |  | 8113  |                 |  |
| Nguyen  | Xuan                                   | 1497978084  | Certified Substance Abuse Counselor  | 12/18/2026  | Y 1/1/2018      |  |
|   |  |   |  | Aii53700318   | Υ               |  |
| Pelletier   | Paul                                   | 1578976569  | Certfied Substance Abuse Counselor   | 4/16/2027   | 8/10/2018       |  |
|   |  |   |  | 8670  | Υ               |  |
| Reyes   | Gina                                   | 1104298850  | Certified Substance Abuse Counselor  | 7/19/2027   | 5/25/2019       |  |
|   |  |   |  | Co55690581  |                 |  |
| Roberts   | Edelisa                                | 1043331671  | Certified Substance Abuse Counselor  | 9/6/2026  | Y 1/1/2018      |  |
|   |  |   |  | 9622  |                 |  |
| Sosa-Gomez  | Rebecca                                | 1770133290  | Certified Substance Abuse Counselor  | 3/14/2027   | Y 10/15/19      |  |
| \/  | Comm                                   | 1720520450  | Contified Collectors Above Courseles   | 7222  | V 40/22/24      |  |
| Vasquez-Grant   | Cory                                   | 1720539158  | Certified Substance Abuse Counselor  | 9/8/2025<br>1569370724                                      | Y 10/23/24<br>Y |  |
| Wulsin  | Patrick                                | 1154150407  | Registered Substance Abuse Counseler   | 7/17/2026   | 7/10/2025       |  |
| Program Name:   |  |   | Registered Substance Abuse Counselor alties/Modalities Program Provides: Residen   |   | 7/10/2023       |  |
| City: French Camp, CA 95231 Phone Number: (209) 468-6208 Lingustic capabilities: Interpreter services are available |  | Telehealth Services Provided: Accepting New Members: Yes  |  |   |                 |  |
| Interpreter service for languages other   | ces are available                      | Accepting Nev   | v Members: Yes   |   |                 |  |
| for languages oth   | ces are available                      |   | w Members: Yes  Idren's Health Insurance Program (CHIP) N  | Members? N/A  |                 |  |
| · ·   | ces are available                      |   | dren's Health Insurance Program (CHIP) N   | Members? N/A  |                 |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie   | dren's Health Insurance Program (CHIP) Norved: Adults. es: Veterans, Older Adults, Transitional Age Yo   | ·   | /, Bisexual,    |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie or Transgender.   | Idren's Health Insurance Program (CHIP) Note of the Program (CHIP) Note of  | ·   | /, Bisexual,    |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2                           | Idren's Health Insurance Program (CHIP) Notes of the Insurance Program | ·   | /, Bisexual,    |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2                           | Idren's Health Insurance Program (CHIP) Note of the Program (CHIP) Note of  | ·   | /, Bisexual,    |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2                           | Idren's Health Insurance Program (CHIP) Notes of the Insurance Program | outh, Lesbian, Gay  |                 |  |
| for languages oth   | ces are available<br>her than English. | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https://website. | Idren's Health Insurance Program (CHIP) Norved: Adults.  es: Veterans, Older Adults, Transitional Age You Health Hours.  I//www.sjcbhs.org/GettingHelp.aspx  | License #   | CC and          |  |
| for languages oth   | ces are available                      | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2                           | Idren's Health Insurance Program (CHIP) Notes of the Insurance Program | License #   |                 |  |
| for languages oth   | ces are available<br>her than English. | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https://website. | Idren's Health Insurance Program (CHIP) Norved: Adults.  es: Veterans, Older Adults, Transitional Age You Health Hours.  I//www.sjcbhs.org/GettingHelp.aspx  | License # and Exp Date CiCAS022611                          | CC and          |  |
| for languages oth   | es are available her than English.     | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https:           | Idren's Health Insurance Program (CHIP) Noted: Adults.  Pes: Veterans, Older Adults, Transitional Age Yours.  Identify the second of the secon | License # and Exp Date CiCAS022611                          | CC and<br>Date  |  |
| for languages oth   | ces are available<br>her than English. | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https://website. | Idren's Health Insurance Program (CHIP) Norved: Adults.  es: Veterans, Older Adults, Transitional Age You Health Hours.  I//www.sjcbhs.org/GettingHelp.aspx  | License # and Exp Date CiCAS022611 19 8/14/2025             | CC and          |  |
| for languages oth   | es are available her than English.     | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https:           | Idren's Health Insurance Program (CHIP) Noted: Adults.  Pes: Veterans, Older Adults, Transitional Age Yours.  Identify the second of the secon | License # and Exp Date CiCAS022611                          | CC and<br>Date  |  |
| for languages oth   | First Name  Victoria                   | Accepting Chil Populations se Cultural Abilitie or Transgender. Office Hours: 2 website: https:           | Idren's Health Insurance Program (CHIP) Noted: Adults.  Pes: Veterans, Older Adults, Transitional Age You Advis.  Idea of the second of the se | License # and Exp Date CiCAS022611 19 8/14/2025 CiCAS022611 | CC and<br>Date  |  |

| Due suses News | warman Namas Daassamillassa Camina (Crasialtica Madalitica Dramana Dravidas Manla saidantial CHC amina |    |                             |            |   |
|----------------|--|----|-----------------------------|------------|---|
| Wagler         | Kelvin   | NA | Substance Abuse Counselor I | 12/11/2025 | N |
|                |  |    |                             | 20189      |   |
| Javier         | Francis  | NA | Substance Abuse Counselor I | 5 5/8/2025 | N |
|                |  |    |                             | R161212052 |   |

**Program Name:** Recovery House | Services/Specialties/Modalities Program Provides: Men's residential SUS services, assessments, group and individual counseling.

Type of Program: SUD

Address: 7248 S. Recovery Rd City: French Camp, CA 95231 Phone Number: (209) 468-6857

Lingustic capabilities:

Interpreter services are available for languages other than English.

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Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A

Populations served: Adults.

Cultural Abilities: Veterans, Older Adults, Gay, Bisexual, or Transgender.

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

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

|           |            | website. https:/ | 5.//www.sjcbris.org/Octilityricip.dspx |             |                |  |
|-----------|------------|------------------|--|-------------|----------------|--|
| Last Name | First Name | NPI              | Type of License                        | License #   | CC and<br>Date |  |
| Last Name | First Name | INPI             | 7.                                     | <del></del> | Date           |  |
|           |            | 4.0707004        | Substance Use Disorder Certified       | 7937        |                |  |
| Berdahl   | Michelle   | 1407070331       | Counselor II                           | 10/26/2025  | Υ              |  |
|           |            |                  |  | Ci36601022  |                |  |
| Boyd      | Richard    | 1407467400       | Certified Alcohol and Drug Counselor I | 10/2/2026   | Υ              |  |
|           |            |                  | Substance Use Disorder Registered      | 15776       |                |  |
| Charles   | Moises     | 1982389649       | Counselor                              | 9/22/25     | Υ              |  |
|           |            |                  | Substance Use Disorder Certified       | 7541        |                |  |
| Crummett  | Tamara     | 1811037807       | Counselor II                           | 12/18/26    | Υ              |  |
|           |            |                  |  | R157837092  |                |  |
| DeVries   | Derek      | 1467277855       | Certified Alcohol and Drug Counselor   | 4 9/4/2025  | Υ              |  |
|           |            |                  |  | C035450915  |                |  |
| Galli     | Andrew     | 1740647361       | Certfied Substance Abuse Counselor I   | 6/25/26     | Υ              |  |
|           |            |                  |  | 11991       |                |  |
| Hall      | Marc       | 1235648593       | Substance Use Disorder Counselor I     | 6/25/2026   | Υ              |  |
|           |            |                  |  | 11987       |                |  |
| Harton    | Antwan     | 1346721701       | Substance Use Disorder Counselor I     | 6/25/2026   | Υ              |  |
|           |            |                  |  | Ci34081021  |                |  |
| Latorraca | Michael    | 1205305968       | Certified Alcohol and Drug Counselor I | 10/18/25    | Υ              |  |
|           |            |                  | Substance Use Disorder Certified       | 9855        |                |  |
| Peterson  | Martin     | 1073098307       | Counselor                              | 4/9/2027    | Υ              |  |
|           |            |                  | Substance Use Disorder Registered      | 11985       |                |  |
| Ramirez   | George     | 1215586607       | Counselor                              | 6/25/26     | Υ              |  |

| Scott William 1710639398 Substance Use Disorder Certified 15667 11/17/2025 Y  Vaccarezza Lisa 1679715767 Counselor 7/30/2026 Y  Vaughn Ginger 1619444700 Substance Use Disorder Certified 8715  Vaughn Ginger 1619444700 Counselor 5/5/2026 Y  Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-9408  Phone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  License # CCC and and Exp Date Date CHIP Members Profession Professio |   |            |                     |   | 17202   |                            |  |
|--|---|------------|---------------------|---|---|----------------------------|--|
| Scott William 1710639398 Counselor 11/17/2025 Y Vaccarezza Lisa 1679715767 Counselor 3312 Vaughn Ginger 1619444700 Counselor 57/30/2026 Y Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95305-0480 Phone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? NI/A Populations served: Adults: Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. Office Hours: Monday-Sunday 24 Hours. Website: www.redwoodfamilycenter.org  Mandor Delia 1417455775 Certified Alcohol and Drug Counselor 1 1/30/2025 N Berkowitz Steve 1205955671 Licensed Marriage and Family Therapist 11/30/2025 N Chrisman Sally 1447144977 Registered Alcohol and Drug Counselor 1 12/6/2025 N Chrisman Sally 1447144977 Registered Alcohol and Drug Counselor 1 12/6/2025 N Cleary Michelle 187102947 Certified Alcohol and Drug Technician 1 3 3/14/2026 N R157565082 A Registered Alcohol and Drug Technician 1 3 3/14/2026 N R157565082 A R157565082   | Rodriguez   | Yvonne     | 1295564474          | Certified Alcohol and Drug Counselor I  | 1/19/2026   | Υ                          |  |
| Vaccarezza Lisa 1679715767 Counselor Vaughn Ginger 1619444700 Jourselor Substance Use Disorder Certified 7/30/2026 Y Substance Use Disorder Certified 8715 5/5/2026 Y Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA, 95350-5408 Phone Number; (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Vaural Ab |   |            |                     | Substance Use Disorder Certified  | 15667   |                            |  |
| Vaughn Ginger 1619444700 Counselor 7/30/2026 Y Vaughn Ginger 1619444700 Counselor Substance Use Disorder Certified 8715 Substance Use Disorder Certified 8715 Substance Use Disorder Certified 8715 Counselor 5/5/2026 Y Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave Certified Substance Use Disorder Services Including: Intake, assessments, treatment planning, individual and group ounseling, collateral, case management, crisis intervention, patient education, safeguarding medication and transportation and discharge services. Individual and family therapy, rehabilitation. Education on benefits of MAT and referral to treatment as necessary.  Telehealth Services Provided: No  Telehealth Insurance Program (CHIP) Members? N/A  Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  License # License # Date  Cand and Exp Date  Amador Delia 1417455775 Certified Alcohol and Drug Counselor I 9/1/2025 N  Triangle Provided: No  Transgender.  Office Hours: Monday-Sunday 24 Hours.  Registered Alcohol and Drug Technician I 10/20/2025 N  Triangle Provided: No  Telehealth Services Provided | Scott   | William    | 1710639398          | Counselor   | 11/17/2025  | Υ                          |  |
| Vaughn Ginger 1619444700 Substance Use Disorder Certified 5/5/2026 Y Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408 Prone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours. Website: www.redwoodfamilycenter.org  Last Name First Name NPI Type of License and Exp Date Date  Amador Delia 1417455775 Certified Alcohol and Drug Counselor I 9/1/2025 N 77643  Berkowitz Steve 1205955671 Licensed Marriage and Family Therapist 11/30/2025 N R144748102 1 10/20/2025 N R144744977 Registered Alcohol and Drug Counselor I 12/6/2025 N R1447144977 Registered Alcohol and Drug Counselor I 10/20/2025 N R1447144977 Registered Alcohol and Drug Counselor I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082 4 12059541984 Registered Alcohol and Drug Technician I 10/15/2026 N R15765082  |   |            |                     | Substance Use Disorder Certified  | 8312  |                            |  |
| Vaughn Ginger 1619444700 Counselor 5/5/2026 Y Program Name: Redwood Frogram Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408 Phone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults.  Cultural Ablitties: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  License # And Exp Date Date Date Date Date Date Date Date  | Vaccarezza  | Lisa       | 1679715767          | Counselor   | 7/30/2026   | Υ                          |  |
| Program Name: Redwood Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408 Phone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  Last Name First Name NPI Type of License Italian (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  Last Name First Name NPI Type of License Italian (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  License # CC and and Exp Date Italian (CHIP) Members? N/A Populations served: Adults.  Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours.  website: www.redwoodfamilycenter.org  License # CC and and Exp Date Italian (CHIP) Members? N/A Populations served: Adults.  City 10923 N/A Populations served: Adults.  License # CC and and Exp Date Italian (CHIP) Members? N/A Populations served: Adults.  City 10923 N/A Populations served: Adults.  City 10924 N/A Populations served: Adults.  City 10924 N/A Pop |   |            |                     | Substance Use Disorder Certified  | 8715  |                            |  |
| Family Treatment Center Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408 Phone Number: (209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Program (CHIP) Members? NI/A Populations served: Adults.  Cuttral Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.  Office Hours: Monday-Sunday 24 Hours. website: www.redwoodfamilycenter.org  Last Name First Name Amador Delia 1417455775 Certified Alcohol and Drug Counselor I 1417455775 Certified Alcohol and Drug Technician I 10/20/2025 N R144748102 1 1225796568 Registered Alcohol and Drug Counselor I 10/15/2026 N R15010932 Amberly R157565082 Amberly R157565082 Amberly R157565082 Amberly R157565082 Ageistered Alcohol and Drug Technician I 10/15/2026 N R157565082 Amberly R157565082 Ageistered Alcohol and Drug Technician I 10/15/2026 N R157565082 Amberly R157565082   | Vaughn  | Ginger     | 1619444700          | Counselor   | 5/5/2026  | Υ                          |  |
| License # CC and and Exp Date   Date   | Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408 Phone Number:(209) 521-1807 Lingustic capabilities: Interpreter services are available for languages other than English.  Accepting New Members: Yes Accepting Children's Health Insurance Programs  Accepting Children's Health Insurance Programs  Cultural Abilities: Veterans, Older Adults, Less |            |                     | Atteral, case management, crisis intervention, patransportation and discharge services. Individual ducation on benefits of MAT and referral to treat vices Provided: No  Members: Yes dren's Health Insurance Program (CHIP) Menored: Adults.  Ses: Veterans, Older Adults, Lesbian, Gay, Bisex | tient education, sal and family there ment as necessa | afeguarding<br>apy,<br>ry. |  |
| License # and Exp Date   Date   Ci4010923   Polia   Polia   Date   Ci4010923   Polia   Polia   Polia   Date   Ci4010923   Polia   Pol   |   |            | , ,                 |   |   |                            |  |
| Last Name         First Name         NPI         Type of License         and Exp Date         Date           Amador         Delia         1417455775         Certified Alcohol and Drug Counselor I         9/1/2025         N           Berkowitz         Steve         1205955671         Licensed Marriage and Family Therapist         11/30/2025         N           Castillo         Krystle         1225796568         Registered Alcohol and Drug Technician I         10/20/2025         N           Chrisman         Sally         1447144977         Registered Alcohol and Drug Counselor I         12/6/2025         N           Cleary         Michelle         1871102947         Certified Alcohol and Drug Counselor I         10/15/2026         N           Echols         Amberly         1205541984         Registered Alcohol and Drug Technician I         3 3/14/2026         N           R157565082         4   |   |            | WCDSItC. WWW.I      |   | П   |                            |  |
| Amador Delia 1417455775 Certified Alcohol and Drug Counselor I 9/1/2025 N  Berkowitz Steve 1205955671 Licensed Marriage and Family Therapist 11/30/2025 N  R144748102 1 Castillo Krystle 1225796568 Registered Alcohol and Drug Technician I 10/20/2025 N  Chrisman Sally 1447144977 Registered Alcohol and Drug Counselor I 12/6/2025 N  Cleary Michelle 1871102947 Certified Alcohol and Drug Counselor I 10/15/2026 N  Echols Amberly 1205541984 Registered Alcohol and Drug Technician I 3/14/2026 N  R157565082 4   |   |            |                     |   |   |                            |  |
| Amador         Delia         1417455775         Certified Alcohol and Drug Counselor I         9/1/2025         N           Berkowitz         Steve         1205955671         Licensed Marriage and Family Therapist         11/30/2025         N           Castillo         Krystle         1225796568         Registered Alcohol and Drug Technician I         10/20/2025         N           Chrisman         Sally         1447144977         Registered Alcohol and Drug Counselor I         12/6/2025         N           Cleary         Michelle         1871102947         Certified Alcohol and Drug Counselor I         10/15/2026         N           Echols         Amberly         1205541984         Registered Alcohol and Drug Technician I         3 3/14/2026         N           R1577565082         4         4         R1577565082         4   | Last Name   | First Name | NPI                 | Type of License   | 1   | Date                       |  |
| Steve   1205955671   Licensed Marriage and Family Therapist   11/30/2025   N   R144748102   1  | Amadar  | Dolio      | 1 4 1 7 4 5 5 7 7 5 | Cortified Alcohol and Drug Councelor I  |   | NI                         |  |
| Steve   1205955671   Licensed Marriage and Family Therapist   11/30/2025   N   R144748102   1  | Alliauoi  | Della      | 1417455775          | Certified Alcohol and Drug Couriseion   |   | IN                         |  |
| Castillo Krystle 1225796568 Registered Alcohol and Drug Technician I 10/20/2025 N  Chrisman Sally 1447144977 Registered Alcohol and Drug Counselor I 12/6/2025 N  Cia6651022 Cleary Michelle 1871102947 Certified Alcohol and Drug Counselor I 10/15/2026 N  Echols Amberly 1205541984 Registered Alcohol and Drug Technician I 3/14/2026 N  R157565082 4  | Porkowitz   | Stovo      | 1205055671          | Licensed Marriage and Family Thoranist  |   | N                          |  |
| Chrisman Sally 1447144977 Registered Alcohol and Drug Counselor I 12/6/2025 N  Cleary Michelle 1871102947 Certified Alcohol and Drug Counselor I 10/15/2026 N  Echols Amberly 1205541984 Registered Alcohol and Drug Technician I 3 3/14/2026 N  R157565082  |   |            |                     |   | R144748102<br>1                                       |                            |  |
| Chrisman         Sally         1447144977         Registered Alcohol and Drug Counselor I         12/6/2025         N           Cleary         Michelle         1871102947         Certified Alcohol and Drug Counselor I         10/15/2026         N           Echols         Amberly         1205541984         Registered Alcohol and Drug Technician I         3 3/14/2026         N           R157565082         4   | Castillo  | krystie    | 1225/96568          | Registered Alconol and Drug Technician I  | 10/20/2025  | N                          |  |
| Cleary Michelle 1871102947 Certified Alcohol and Drug Counselor I 10/15/2026 N  Echols Amberly 1205541984 Registered Alcohol and Drug Technician I 3 3/14/2026 N  R157565082   | Chrisman  | Sally      | 1447144977          | Registered Alcohol and Drug Counselor I   |   | N                          |  |
| Cleary         Michelle         1871102947         Certified Alcohol and Drug Counselor I         10/15/2026         N           Echols         Amberly         1205541984         Registered Alcohol and Drug Technician I         3 3/14/2026         N           R157565082         4   |   | ,          |                     | 5   | +   |                            |  |
| Echols Amberly 1205541984 Registered Alcohol and Drug Technician I 3 3/14/2026 N R157565082  | Cleary  | Michelle   | 1871102947          | Certified Alcohol and Drug Counselor I  |   | N                          |  |
| R157565082<br>4  | ·   | IMICHELLE  |                     | <u> </u>  |   |                            |  |
| R157565082<br>4  |   | Wilcheile  |                     |   | R150109032  |                            |  |
| 4  | Echols  |            | 1205541984          | Registered Alcohol and Drug Technician I  |   | N                          |  |
| Eisenburg Melissa 1427882463 Registed Alcohol and Drug Technician I 08/20/2025 N   | Echols  |            | 1205541984          | Registered Alcohol and Drug Technician I  | 3 3/14/2026   | N                          |  |
|  | Echols  |            | 1205541984          | Registered Alcohol and Drug Technician I  | 3 3/14/2026<br>R157565082                             | N                          |  |

|                               |                             | 1   | 1  | R148432092               | <u> </u>  |  |  |
|-------------------------------|-----------------------------|---|--|--------------------------|-----------|--|--|
|                               |                             |   |  |                          |           |  |  |
| F                             | A                           | 4457064570  | Desistant Alaskal and Davis Tookaisian I         | 2                        | N.        |  |  |
| Fuentez                       | Angelina                    | 1457064578  | Registered Alcohol and Drug Technician I         | 09/22/2025               | N         |  |  |
| C                             | A!                          | 4.447520200   | Contified Alachal and David Councilor II         | A063441123               | N.        |  |  |
| Gaona                         | April                       | 1417538299  | Certified Alcohol and Drug Counselor II          | 11/13/2025<br>RH00123724 | N         |  |  |
| Caraia                        | Deleves                     | 1072155206  | Desistant Alaskal and Davis Toskaisan I          |                          | N.        |  |  |
| Garcia                        | Dolores                     | 1073155396  | Registered Alcohol and Drug Technican I          | 2/1/2026<br>R148854112   | N         |  |  |
| Gier                          | Karri                       | 1134839384  | Registered Alcohol and Drug Technician I         | 2 11/15/25               | N         |  |  |
| Glei                          | Kaiii                       | 1134639364  | Subtance Use Disorder Registered                 | 17339                    | IN        |  |  |
| Vina.                         | luctus                      | 1326813395  | Counselor  |                          | N.        |  |  |
| King                          | Justus                      | 1320813395  | Counselor  | 2/9/2026<br>R150600523   | N         |  |  |
| Mejia                         | Erica                       | 1386335024  | Registered Alcohol and Drug Technician I         | 5/4/2026                 | N         |  |  |
| iviejia                       | Liica                       | 1380333024  | Registered Alcohol and Drug Technician I         | C12691214                | IN        |  |  |
| Myers                         | Laura                       | 1386152593  | Certified Alcohol and Drug Counselor             | 10/12/2025               | N         |  |  |
| iviyers                       | Laura                       | 1380132393  | Certified Alcohol and Drug Counselor             | C21131214                | Y         |  |  |
| Nelson                        | Beth                        | 1912548033  | Certified Alcohol and Drug Counselor             | 12/2/2025                | 5/22/2025 |  |  |
| INCISOII                      | Detri                       | 1912346033  | Certified Alcohol and Drug Couriseion            | RH00139709               | 3/22/2023 |  |  |
|                               |                             |   |  | 24                       |           |  |  |
| Nunez                         | Veronica                    | 1235899303  | Registered Alcohol and Drug Technician I         | 10/2/2025                | N         |  |  |
| Nullez                        | Veronica                    | 1233699303  | Registered Alcohol and Drug Technician I         | A064730724               | IN        |  |  |
| Prather                       | Laci                        | 1154963916  | Certified Alcohol and Drug Counselor II          | 7/26/2025                | N         |  |  |
| Fraulei                       | Laci                        | 1134903910  | Certified Alcohol and Drug Couriselor II         | 14649                    | IN        |  |  |
| Rios                          | Angela                      | 1609426147  | Associate Marriage and Family Therapist          | 9/10/2025                | N         |  |  |
| KIUS                          | Aligeia                     | 1009420147  | Associate Marriage and Family Therapist          | R149616012               | IN        |  |  |
|                               |                             |   |  | 3                        |           |  |  |
| Williams                      | April                       | 1952140329  | Registered Alcohol and Drug Technician I         | 01/27/2026               | N         |  |  |
| vviiilaiiis                   | Дріп                        | 1332140323  | Registered Alcohol and Drug Technician T         | R146966052               | I V       |  |  |
| Zapien                        | Felicia                     | 1386377844  | Registered Alcohol and Drug Technician I         |                          | N         |  |  |
|                               |                             |   | TION ASSISTED TREATMENT                          | 2 3/ 17/ 2023            | 11        |  |  |
| Program Nam                   |                             | •   | alties/Modalities Program Provides: Medicall     | v Supervised Ma          | athadone  |  |  |
| •                             | nter Stockton LS            | _   | etoxification (OTP) Outpatient Treatment (OTP) I | •                        |           |  |  |
|                               |                             | Treatment.  | commodition (OTT) Sulpation Troutment (OTT)      | vicaloution / toole      | ntou      |  |  |
| Type of Progr                 |                             | Troutmont.  |  |                          |           |  |  |
| Address: 862                  |                             |   |  |                          |           |  |  |
| Sacramento R                  |                             |   |  |                          |           |  |  |
| City: Stockton, CA 95210-3747 |                             |   |  |                          |           |  |  |
|                               | Phone Number:(209) 478-2487 |   | vices Provided: Yes                              |                          |           |  |  |
|                               | Lingustic capabilities:     |   | Members: Yes                                     |                          |           |  |  |
| •                             | vices are available         |   |  |                          |           |  |  |
|                               | other than English.         | According Obit  | dron's Hoolth Incorrence Dronous (OHID) Man      | nhara 2 NI/A             |           |  |  |
| Ġ.                            |                             |   | dren's Health Insurance Program (CHIP) Men       | iners! N/A               |           |  |  |
|                               |                             | Populations se  |  |                          | 1         |  |  |
|                               |                             | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. |  |                          |           |  |  |

|   |  | Office Hours: N   | onday-Friday 5:00am - 1:00pm, Saturday-Sun   | day 7:00am-11:00 | Dam            |  |  |
|---|--|---|--|------------------|----------------|--|--|
|   |  | website: https://pinnacletreatment.com/locations/                                   |  |                  |                |  |  |
| Last Name   | First Name   | NPI   | Type of License  | License #        | CC and<br>Date |  |  |
|   |  |   | , and the second | 135063           | Υ              |  |  |
| Acevedo   | Maria  | 1447903679  | Certified Drug and Alcohol Counselor   | 8/8/2025         | 6/30/2023      |  |  |
|   |  |   |  | Aii05230021      | Υ              |  |  |
| Ayala   | Richard  | 1174746044  | Certified Drug and Alcohol Counselor   | 8 12/3/2026      | 6/14/2024      |  |  |
|   |  |   |  | C14831214        | Υ              |  |  |
| Camacho   | Nancy  | 1679024632  | Certified Drug and Alcohol Counselor   | 5/26/2027        | 4/10/2023      |  |  |
|   |  |   |  | 738965           |                |  |  |
| Coronado  | Kainasse   | 1427709922  | Licensed Vocational Nurse  | 4/30/2027        | Y 3/9/2024     |  |  |
|   |  |   |  | 15538            | Υ              |  |  |
| Estrada   | Louis  | 1265217244  | Registered Alcohol and Drug Technician   | 6/9/2026         | 7/31/2025      |  |  |
|   |  |   |  | 9963             |                |  |  |
| Gonzales  | Esperanza  | 1003421314  | Certified Drug and Alcohol Counselor   | 4/13/2026        | Y 12/12/24     |  |  |
|   |  |   |  | A154190          |                |  |  |
| Hamilton  | Robert   | 1659791101  | Physician  | 10/31/2027       | Υ              |  |  |
|   |  |   |  | 6568             | Υ              |  |  |
| Kourm   | Savan  | 1215067228  | Certified Drug and Alcohol Counselor   | 12/19/2026       | 4/14/2024      |  |  |
|   |  |   |  | 729572           | Υ              |  |  |
| Magana  | Sylvia   | 1518651389  | Licensed Vocational Nurse  | 4/30/2026        | 7/16/2024      |  |  |
|   |  |   |  | 290357           |                |  |  |
| Morones   | Carisa   | 1104360379  | Licensed Vocational Nurse  | 5/30/2027        | Y 12/23/23     |  |  |
|   |  |   |  | NPF15701         |                |  |  |
| Oakes   | Marya  | 1912978263  | Family Nurse Practitioner  | 12/31/2027       | Υ              |  |  |
|   |  |   |  | A154190          |                |  |  |
| Talleur   | Brian  | 1659791101  | Physician  | 10/31/2027       | Y              |  |  |
|   |  | 4404054433  |  | 6303             | γ              |  |  |
| Williams  | Ted  | 1194954123  | Certified Drug and Alcohol Counselor   | 8/9/2026         | 9/13/2023      |  |  |
| Medical Clinic S<br>Type of Progra<br>Address:1839 S<br>City: Stockton, | Program Name: Aegis 5th Street<br>Medical Clinic Stockton<br>Type of Program: SUD<br>Address:1839 S. El Dorado St.<br>City: Stockton, CA 95206 |   | Services/Specialties/Modalities Program Provides: Medically Supervised Methadone Maintenance Detoxification (OTP) Outpatient Treatment (OTP) Medication Assisted Treatment.  |                  |                |  |  |
|   | :(209) 463-0872  |   | vices Provided: Yes  |                  |                |  |  |
| _   | Lingustic capabilities:  |   | Members: Yes   |                  |                |  |  |
| •   | ces are available  |   |  |                  |                |  |  |
|   | ther than English.   |   |  |                  |                |  |  |
| F   |  |   | dren's Health Insurance Program (CHIP) Mei   | mbers? N/A       |                |  |  |
|   |  | Populations se  |  |                  |                |  |  |
|   |  | Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender. |  |                  |                |  |  |

|   |                  | Office Hours: N  | Monday - Friday 5am - 1pm Saturday, Sunday,  | and Holidays 7a        | m - 11am       |
|---|------------------|------------------|--|------------------------|----------------|
|   |                  | website: https:/ | /pinnacletreatment.com/locations/  |                        |                |
| Last Name   | First Name       | NPI              | Type of License  | License # and Exp Date | CC and<br>Date |
|   |                  |                  | Substance Use Disorder Registered  | 7706                   |                |
| Antolin   | Rochelle         | 1447748520       | Counselor  | 11/8/2025              | Y 2/2/2024     |
|   |                  |                  | Substance Use Disorder Certified   | 7266                   | Υ              |
| Crawford  | Sarah            | 1063700540       | Counselor  | 6/22/2026              | 7/24/2025      |
|   |                  |                  |  | R142668042             | Υ              |
| Gilbreath   | Michelle         | 1639750813       | Registered Alcohol and Drug Technician   | 1 4/26/2026            | 7/24/2025      |
|   |                  |                  |  | G48570                 |                |
| Hamilton  | Robert           | 1386693547       | Physician  | 7/31/2026              | Υ              |
|   |                  |                  |  | 95012302               | Υ              |
| Johnson   | P. Curly         | 1235770165       | Nurse Practitioner   | 6/30/2026              | 6/16/2025      |
|   |                  |                  | Substance Use Disorder Certified   | R12901402              | Υ              |
| Jones   | Kent             | 1588129993       | Counselor  | 2/6/2027               | 7/24/2025      |
|   |                  |                  |  | 183039                 | Υ              |
| Lu  | Divina           | 1316001381       | Licensed Vocational Nurse  | 3/31/2027              | 3/27/2024      |
|   |                  |                  |  | R142727042             | Υ              |
| Negrete   | Dolores          | 1447832464       | Registered Alcohol and Drug Technician   | 1 4/28/2026            | 2/21/2024      |
|   |                  |                  | Substance Use Disorder Certified   | 8051                   | Υ              |
| Nguyen  | Linda            | 1558886507       | Counselor  | 7/1/2026               | 4/18/2023      |
|   |                  |                  |  | 17300                  | Υ              |
| Palafox   | Divina           | 1912061995       | Licensed Vocational Nurse  | 11/30/2026             | 4/17/2024      |
|   |                  |                  |  | C050370118             | Υ              |
| Pelletier   | Steve            | 1750652483       | Certified Alcohol and Drug Counselor   | 1/28/2027              | 1/31/2024      |
|   |                  |                  |  | 17283                  | Υ              |
| Sandavol  | Monique          | 1396514584       | Counselor  | 2/1/2026               | 2/27/2024      |
|   |                  |                  |  | A154190                | Υ              |
| Talleur   | Brian            | 1659791101       | Physician  | 4/30/2027              | 10/7/2023      |
|   |                  |                  | Substance Use Disorder Certified   | 6030                   | Υ              |
| Williams  | Ginned           | 1942363585       | Counselor II   | 5/25/2027              | 2/28/2025      |
|   |                  |                  |  | 6480                   | Υ              |
| Williams  | Trisha           | 141749339        | Counselor  | 3/27/2026              | 1/29/2025      |
|   |                  |                  |  | 95028745               | Y              |
| Yanos   | Cyrus            | 1073378113       | Nurse Practitioner   | 10/31/2026             | 3/10/2025      |
| Program Name<br>Treatment Cent<br>Street            | •                | _                | ialties/Modalities Program Provides: Medicall etoxification, Outpatient Treatment (OTP), and M |                        |                |
| Type of Progra<br>Address: 1947<br>St, Suites B and | North California |                  |  |                        |                |

| City: Stockton, C  | A 95204               |  |  |                         |                   |  |  |
|--|-----------------------|--|--|-------------------------|-------------------|--|--|
| Phone Number:(209) 463-0870 Lingustic capabilities: Interpreter services are available for languages other than English. |                       | Telehealth Services Provided: Yes  |  |                         |                   |  |  |
|  |                       | Accepting New  |  |                         |                   |  |  |
|  |                       |  |  |                         |                   |  |  |
| <b>E</b>   | ioi tilali Eligiloli. | Accepting Child  | dren's Health Insurance Program (CHIP) Men     | nbers? N/A              |                   |  |  |
| C.   |                       | Populations ser  |  |                         |                   |  |  |
|  |                       | •  | s: Veterans, Older Adults, Lesbian, Gay, Bisex | ual. or Transgen        | der.              |  |  |
|  |                       |  | londay - Friday 5am - 1pm Saturday, Sunday,    |                         |                   |  |  |
|  |                       |  | pinnacletreatment.com/locations/               |                         | r                 |  |  |
|  |                       |  |  |                         |                   |  |  |
|  |                       |  |  | License #               | CC and            |  |  |
| Last Name  | First Name            | NPI  | Type of License                                | and Exp Date            | Date              |  |  |
|  |                       | 1000000111   |  | 15771                   | V 6 /6 /2025      |  |  |
| Bellomo  | Sebastian             | 1063299444   | Registered Counselor                           | 7/17/2028               | Y 6/6/2025        |  |  |
|  |                       | 4074440757   |  | 238131                  | γ                 |  |  |
| Cano   | Jacqueline            | 1871149757   | Licensed Vocational Nurse                      | 9/30/2026               | 7/10/2025         |  |  |
| Carranda   | Chardau a             | 4054044060   | Barista and Community                          | 19868                   | Υ                 |  |  |
| Coronado   | Charlotte             | 1851044069   | Registered Counselor                           | 1/8/2027                | 11/5/2024         |  |  |
| E I  | 1 - 1 - 1             | 4700744407   | N Baratitis and                                | 5493                    | γ                 |  |  |
| Ford   | Leigh                 | 1790741197   | Nurse Practitioner                             | 7/31/2026               | 7/16/2025         |  |  |
| C 1  | ) / · · · · ·         | 4226047550   | literated Managing and Nillian                 | 95204                   | γ                 |  |  |
| Gonzales   | Vianey                | 1336917558   | Licensed Vocational Nurse                      | 9/30/2027               | 7/10/2025         |  |  |
| I/ a   |                       | 125,0055502  | Desistant d Dunca and Alachal Tachuisian       | 74258                   | Y<br>4 /4 E /202E |  |  |
| Kaur   | Jesmeen               | 1356065593   | Registered Drug and Alcohol Technician         | 4/26/2026               | 1/15/2025         |  |  |
| Newsweets  | Managarita            | 1042001542   | Desistened Days and Alachel Technisis          | R15079105               | V 7/1/2024        |  |  |
| Navarrete  | Margarita             | 1942991542   | Registered Drug and Alcohol Technician         | 5/23/2026               | Y 7/1/2024<br>Y   |  |  |
| Douton   | Tooro                 | 1235955634   | Degistered Drug and Alachel Technician         | R15905712<br>12/10/2025 |                   |  |  |
| Payton   | Teara                 | 1233933034   | Registered Drug and Alcohol Technician         |                         | 7/10/2025         |  |  |
|  |                       |  |  | 11025                   | Υ                 |  |  |
| Sagarnaga  | Cynthia               | 12958868903  | Certified Counselor                            | 8/22/2026               | 8/20/2024         |  |  |
|  |                       |  |  | R160598032              |                   |  |  |
| Smith  | Mark                  | 1912700360   | Registered Drug and Alcohol Technician         | 5 3/27/2026             | Y 4/7/2025        |  |  |
| Velasquez-   |                       |  |  | 41847                   | Υ                 |  |  |
| Rosales  | Normita               | 1609464114   | Licensed Psychiatric Technician                | 8/31/2026               | 7/19/2025         |  |  |
| Program Name: Aegis Treatment Centers Lodi   |                       | Services/Specialties/Modalities Program Provides: Medically Supervised Methadone Maintenance Detoxification, Outpatient Treatment (OTP) Medication Assisted Treatment. |  |                         |                   |  |  |
| Type of Program  |                       |  |  |                         |                   |  |  |
| Address: 541 South Ham Lane,   |                       |  |  |                         |                   |  |  |
| Suite A&B<br>City: Lodi, CA 95   | 5242                  |  |  |                         |                   |  |  |
|  |                       | Talahasiti. O  | ia a a Duanida de Va a                         |                         |                   |  |  |
| Phone Number: (209)224-8940  |                       | Telehealth Services Provided: Yes  |  |                         |                   |  |  |

| Lingustic capabilities: Interpreter services are available for languages other than English. |            | Accepting New Members: Yes |   |                           |                |  |  |  |
|--|------------|----------------------------|---|---------------------------|----------------|--|--|--|
| Ė  |            | <b>Accepting Chil</b>      | dren's Health Insurance Program (CHIP) Men      | nbers? N/A                |                |  |  |  |
|  |            | Populations se             | erved: Adults.                                  |                           |                |  |  |  |
|  |            | Cultural Abilitie          | es: Veterans, Older Adults, Lesbian, Gay, Bisex | ual, or Transgen          | der.           |  |  |  |
|  |            | Office Hours: N            | Monday - Friday 5:00am - 1:00pm Saturday, Su    | ınday, Holidays 7         | 7am - 12pm     |  |  |  |
|  |            | website: https://          | pinnacletreatment.com/locations/                | •                         | ·              |  |  |  |
|  | <u>-</u>   |                            |   | License #                 | CC and         |  |  |  |
| Last Name  | First Name | NPI                        | Type of License                                 | and Exp Date              | †              |  |  |  |
| August   | Crystal    | 1255808507                 | Licensed Vocational Nurse                       | 695962<br>7/31/2025       | Y<br>7/17/2024 |  |  |  |
|  |            |                            |   | 260740                    | Υ              |  |  |  |
| Campos   | John       | 1407192297                 | Licensed Vocational Nurse                       | 6/30/2027                 | 7/17/2024      |  |  |  |
| Canton   | David      | 1023815529                 | Registered Alcohol and Drug Technician          | R160106022<br>5 2/20/2026 | Y<br>3/10/2025 |  |  |  |
|  |            |                            |   | 42133                     | Υ              |  |  |  |
| Castro   | Julie      | 1548927544                 | Licensed Psychiatric Technician                 | 12/31/2026                | 7/19/2024      |  |  |  |
|  |            |                            |   | A051320819                |                |  |  |  |
| Galvez   | John       | 1487032322                 | Certified Alcohol and Drug Technician           | 4/2/2027                  | Y 11/29/24     |  |  |  |
| Garcia   | Mark       | 1962102079                 | Registered Alcohol and Drug Technician          | 15103<br>4/3/2026         | Y 11/22/24     |  |  |  |
|  |            |                            |   | 12629                     |                |  |  |  |
| Garcia   | Nicolette  | 1659039758                 | Registered Alcohol and Drug Technician          | 12/3/2025                 | Y 11/18/24     |  |  |  |
| Jacinto  | Carol      | 1033327358                 | Certified Alcohol and Drug Counselor            | 7332<br>4/10/2026         | Y<br>6/10/2025 |  |  |  |
|  |            |                            |   | 710544                    | Υ              |  |  |  |
| Johnson  | Alexandria | 1407568686                 | Licensed Vocational Nurse                       | 7/31/2025                 | 5/11/2024      |  |  |  |
|  |            |                            |   | 9798                      |                |  |  |  |
| Preap  | Jennifer   | 1043866627                 | Registered Alcohol and Drug Technician          | 8/8/2025                  | Y 10/16/24     |  |  |  |
| Rabah  | Willeed    | 1255956520                 | Physician and Surgeon                           | A185348<br>6/30/2027      | Y 10/31/24     |  |  |  |
| na an  | - Villeed  | 1233333323                 | . Hydroidin dire dangeon                        | A154190                   | 1 20/02/21     |  |  |  |
| Talleur  | Brian      | 1659791101                 | Physician                                       | 4/30/2027                 | Υ              |  |  |  |
|  | 1          |                            | Licensed Vocational Nurse and                   | 29535                     |                |  |  |  |
| Townsell   | Christina  | 1245053354                 | Psychiatric Technician                          | 5/31/2027                 | Y 12/14/24     |  |  |  |
|  |            |                            |   | 7228                      |                |  |  |  |
| Tun  | Suehei     | 1548673999                 | Certified Alcohol and Drug Technician           | 1/21/2026                 | Y 11/12/24     |  |  |  |
| White  | Kimberly   | 1649459546                 | Certified Alcohol and Drug Technician           | 6413<br>4/6/2026          | Y 10/29/24     |  |  |  |

**Program Name:** Aegis
Treatment Centers Manteca

Medication Assisted Treatment.

Type of Program: SUD Address: 955 Center Street

Suite 12A

Ġ

City: Manteca, CA 95337

Phone Number: (209) 239-9600

Lingustic capabilities:

Interpreter services are available for languages other than English.

Telehealth Services Provided: Yes

Accepting New Members: Yes

Accepting Children's Health Insurance Program (CHIP) Members? N/A.

Populations served: Adults.

Cultural Abilities: Veterans, Older Adults, Lesbian, Gay, Bisexual, or Transgender.

Services/Specialties/Modalities Program Provides: Outpatient Treatment, and

Office Hours: Monday - Friday 5:30am - 1pm Saturday, Sunday, Holidays 8am - 11 am

**website**: https://pinnacletreatment.com/location/california/manteca/aegis-treatment-centers-manteca/

|                |            | THE REPORT OF THE PERSON OF TH |                                      |              |            |
|----------------|------------|--|--------------------------------------|--------------|------------|
|                |            |  |                                      | License #    | CC and     |
| Last Name      | First Name | NPI  | Type of License                      | and Exp Date | Date       |
|                |            |  |                                      | 38306        |            |
| Aceves         | Mellissa   | 1871957902   | Licensed Psychiatric Technician      | 5/31/2027    | Υ          |
|                |            |  | Substance Use Disorder Registered    | 13008        | Υ          |
| Duenas         | Cinthia    | 1497401186   | Counselor                            | 3/3/2026     | 8/18/2024  |
|                |            |  |                                      | 175628       | Υ          |
| Falcon         | Christina  | 1154898393   | Licensed Vocational Nurse            | 10/31/2025   | 5/27/2024  |
|                |            |  |                                      | 736533       |            |
| Gonzales       | Katryn     | 1750106373   | Licensed Vocational Nurse            | 9/30/2027    | Y 11/30/24 |
|                |            |  |                                      | G48570       |            |
| Hamilton       | Robert     | 1386693547   | Physician                            | 7/31/2026    | Υ          |
|                |            |  |                                      | 72342        | Υ          |
| Davis          | Mary Jane  | 1861822744   | Licensed Vocational Nurse            | 3/31/2026    | 9/24/2024  |
|                |            |  | Substance Use Disorder Registered    | 15506        |            |
| Jimenez        | Jennifer   | 1336873959   | Counselor                            | 7/6/2026     | Y 12/31/24 |
|                |            |  |                                      | R158691112   |            |
|                |            |  | Substance Use Disorder Registered    | 4            | Υ          |
| Kolleh         | Esther     | 1831915883   | Counselor                            | 11/15/2025   | 2/15/2025  |
|                |            |  |                                      | C27861214    | Υ          |
| McClendon      | Teresa     | 1336291897   | Certified Alcohol and Drug Counselor | 9/18/2027    | 2/16/2024  |
|                |            |  |                                      | 26531        | Υ          |
| Mohr           | Rebecca    | 1154898302   | Licensed Psychiatric Technician      | 1/31/2027    | 3/27/2024  |
|                |            |  |                                      | 687867       |            |
| Palacios-Reyes | Danessa    | 1558081752   | Licensed Vocational Nurse            | 8/31/2026    | Y 5/1/2024 |

|                 |                    | 1   |   | 42180                |                                       |  |  |  |
|-----------------|--------------------|---|---|----------------------|---------------------------------------|--|--|--|
| Salas           | Graciela           | 1417602038  | Licensed Psychiatric Technician               | 9/30/2025            | Y 8/6/2024                            |  |  |  |
|                 |                    |   |   | 95029771             | , .,                                  |  |  |  |
| Sanchez         | Nelson             | 1801639133  | Nurse Practitioner                            | 8/31/2027            | Υ                                     |  |  |  |
| Garreriez       | 110.5011           | 1001003100  | Transc Fractione.                             | 95012835             | · · · · · · · · · · · · · · · · · · · |  |  |  |
| Sandhu          | Sukhjit            | 1629628763  | Nurse Practitioner                            | 7/31/2026            | Υ                                     |  |  |  |
| Sarrarra        | - Carring C        | 1023020703  | Transc Fractione.                             | 687574               | · ·                                   |  |  |  |
| Sauers          | Elizabeth          | 1922877950  | Licensed Vocational Nurse                     | 12/31/2026           | Y 1/3/2024                            |  |  |  |
|                 |                    |   |   | C21671214            | Υ                                     |  |  |  |
| Smith           | Robin              | 1538682927  | Certified Alcohol and Drug Counselor          | 10/22/2027           | 4/18/2024                             |  |  |  |
| Simeri          | 1.00               | 1330002327  | Substance Use Disorder Certified              | 9502                 | 1/ 10/ 2021                           |  |  |  |
| Thompson        | Shirley            | 1528424470  | Counselor                                     | 8/26/2027            | Y 5/9/2024                            |  |  |  |
| mompson         | Jimiey             | 1320121170  | Substance Use Disorder Registered             | 12547                | Υ                                     |  |  |  |
| Vang            | Down               | 1336654672  | Counselor                                     | 6/7/2027             | 12/5/2024                             |  |  |  |
| Varia           |                    | 1330031072  | Substance Use Disorder Registered             | 16732                | 12/3/2021                             |  |  |  |
| Yohana          | Evet               | 1447964283  | Counselor                                     | 12/24/2025           | Y 8/6/2024                            |  |  |  |
| Program Name    |                    |   | alties/Modalities Program Provides: Medica    |                      |                                       |  |  |  |
| Treatment Cent  |                    |   | etoxification (OTP) Outpatient Treatment (OTF | •                    |                                       |  |  |  |
| Type of Progra  |                    | Treatment   | Stokinoulon (OTT) Outpution Troutment (OTT    | ) Woodoution 7 toolo | itou                                  |  |  |  |
|                 | N. El Dorado St.   | Trodunon  |   |                      |                                       |  |  |  |
| City: Stockton, |                    |   |   |                      |                                       |  |  |  |
| _               | r:(209) 938-0228   | Telehealth Sen  | vices Provided: Vos                           |                      |                                       |  |  |  |
| Lingustic capa  | •                  | Telehealth Services Provided: Yes Accepting New Members: Yes      |   |                      |                                       |  |  |  |
|                 | ices are available | Accepting New   | Michipers. 165                                |                      |                                       |  |  |  |
| •               | ther than English. |   |   |                      |                                       |  |  |  |
|                 | anor than Englion. | Accepting Children's Health Insurance Program (CHIP) Members? N/A |   |                      |                                       |  |  |  |
| F               |                    |   | Populations served: Adults.                   |                      |                                       |  |  |  |
|                 |                    |   | es: Veterans, Older Adults, Lesbian, Gay, Bis | ovual and Transac    | ndor                                  |  |  |  |
|                 |                    |   |   |                      |                                       |  |  |  |
|                 |                    | Closed.   | Monday - Friday: 5am - 1:30pm,Saturday: 7ar   | n- i iam,Sunday an   | u nolluays.                           |  |  |  |
|                 |                    |   | medmark.com/locations/california/stockton     |                      |                                       |  |  |  |
|                 |                    | website. http://i   |   |                      |                                       |  |  |  |
|                 |                    |   |   | licence #            | CCand                                 |  |  |  |
| Loot Nove       | First Noves        | NIDI  | Turns of Linears                              | License #            | CC and                                |  |  |  |
| Last Name       | First Name         | NPI   | Type of License                               | and Exp Date         |                                       |  |  |  |
| Doubists        | N 4 a a            | 1111015130  | Dhusisian                                     | A70192               | Y<br>7/21/2025                        |  |  |  |
| Bautista        | Maryrose           | 1114945128  | Physician                                     | 5/31/2027            | 7/31/2025                             |  |  |  |
| Cooks           | N 4 o mile         | 171000005   | Substance Use Disorder Certified              | 9533                 | Y 7/5/2024                            |  |  |  |
| Costa           | Mark               | 1710668652  | Counsleor                                     | 2/25/2026            |                                       |  |  |  |
| 11-2-1-         | D !                | 4206020252  | N Burnithia                                   | 15461                | V 42/26/21                            |  |  |  |
| Holiday         | Brenda             | 1306839352  | Nurse Practitioner                            | 4/30/2027            | Y 12/26/24                            |  |  |  |
| <u>.</u> .      |                    | 1   | Substance Use Disorder Certified              | 16429                | Y 12/19/24                            |  |  |  |
| Labass          | Shelly             | 1295489029  | Counselor                                     | 8/9/2026             |                                       |  |  |  |

| Lamb         Nancy         1982317525         Co           Lo         Lawrence         1770122384         Co           Sul         Sul         Sul           Magana         Margarita         1104421437         Co           Sul         Sul | bstance Use Disorder Registered bunselor bstance Use Disorder Registered bunselor bstance Use Disorder Registered bunselor | 11/18/2027<br>10180<br>12/3/2025<br>16318 | 07/1/2025<br>Y<br>09/6/2024 |
|---|--|---|-----------------------------|
| Lo Lawrence 1770122384 Co  Magana Margarita 1104421437 Co  Sul  | bunselor<br>bstance Use Disorder Registered  | 12/3/2025                                 | Υ                           |
| Lo Lawrence 1770122384 Co  Magana Margarita 1104421437 Co  Sul  | bunselor<br>bstance Use Disorder Registered  |   | 09/6/2024                   |
| Magana Margarita 1104421437 Co  | <del>-</del>   | 16210                                     |                             |
| Magana Margarita 1104421437 Co  | <del>-</del>   | ΤΩϽΤΩ                                     | Υ                           |
|   |  | 8/30/2026                                 | 6/16/2025                   |
| Martinas Nicola (400000443 Ca   | bstance Use Disorder Certified   | 8653                                      |                             |
| Martinez Nicole 1063988442 Co   | ounselor   | 3/28/2027                                 | Y 12/27/24                  |
| Su  | bstance Use Disorder Registered  | 21438                                     | Y 6/4/2025                  |
| Melot Alisa 1225829203 Co   | ounselor   | 5/5/2026                                  |                             |
| Su  | bstance Use Disorder Certified   | 6197                                      | Υ                           |
| Pena Anna 1972667236 Co   | ounselor   | 10/27/2025                                | 7/18/2025                   |
| Su  | bstance Use Disorder Registered  | 16722                                     | Υ                           |
| Sidlauskas Anne 1336859339 Co   | ounselor   | 9/21/2025                                 | 9/23/2024                   |
| Su  | bstance Use Disorder Registered  | 11204                                     | Υ                           |
| St. James Jacqueline 1598233454 Co  | ounselor   | 11/16/2025                                | 10/9/2024                   |
| Su  | bstance Use Disorder Certified   | 6793                                      | Y 4/4/2025                  |
| Urive Serena 1255636734 Co  | ounselor   | 7/14/2026                                 |                             |
| Su  | bstance Use Disorder Registered  | 14078                                     | Y 12/20/24                  |
| Valenzuela Augustine 1831809383 Co  | ounselor   | 9/3/2025                                  |                             |
| Su  | bstance Use Disorder Certified   | 17460                                     | Y 5/9/2025                  |
| Williams Jay 1760049043 Co  | ounselor   | 10/14/2026                                |                             |
| Program Name: Towns Health Services/Specialtie  | es/Modalities Program Provides: IOP and  | OP services.                              |                             |
| Services  |  |   |                             |
| Type of Program: SUD  |  |   |                             |
| Address: 330 S. Fairmont Ave  |  |   |                             |
| Suite 2   |  |   |                             |
| <b>City:</b> Lodi, CA 95240   |  |   |                             |
| Phone Number:(209)744-9909 Telehealth Services  | s Provided: Yes  |   |                             |
| Lingustic capabilities: Accepting New Mer   | mbers: Yes   |   |                             |
| Interpreter services are available  |  |   |                             |
| for languages other than English.   |  |   |                             |
| Accepting Children  | n's Health Insurance Program (CHIP) Mem  | ibers? No                                 |                             |
| Populations served  | d: Adults.   |   |                             |
| Cultural Abilities: V   | /eterans, Older Adults, Lesbian, Gay, Bisexu   | ual, or Transgend                         | der.                        |
| Office Hours: Mono  | day - Friday 8am - 12 pm, 1pm- 5pm   |   |                             |
| website:https://town  | nshealthservices.com/  |   |                             |
|   |  |   |                             |
|   |  | License #                                 | CC and                      |
| Lock Name   First Name   AIDI   | pe of License  | and Exp Date                              | Date                        |
| Last Name   First Name   NPI   Ty   | PC OI EICCIISC   | <u> </u>                                  | 1                           |
| Last Name   First Name   NPI   Ty   | pe of Electise   | R153098102                                | Υ                           |

|               | 1           | <u> </u>   |  | R157310824  | Υ          |
|---------------|-------------|------------|--|-------------|------------|
| Bocage        | Rebecca     | 1144050600 | Registered Alcohol and Drug Technician | 8/7/2026    | 7/24/2025  |
| 200080        | 1100000     |            |  | R150654052  | Υ          |
| Brown         | Vanessa     | 1043900913 | Registered Alcohol and Drug Technician | 3 5/9/2020  | 7/24/2025  |
|               |             |            | Substance Use Disorder Registered      | 20312       | Υ          |
| Casillas      | Edith       | 1861148066 | Counselor                              | 12/23/2025  | 7/24/2025  |
|               |             |            |  | R147510072  | Υ          |
| Castaneda     | Iririan     | 1427783000 | Registered Alcohol and Drug Technician | 2 7/14/2026 | 7/24/2025  |
|               |             |            |  | R167920429  | Υ          |
| Cross         | Tanisha     | 1679204291 | Registered Alcohol and Drug Technician | 1 6/23/2026 | 7/24/2025  |
|               |             |            |  | 2CS6085     | Υ          |
| Delong        | Tammy       | 1972150514 | Clinical Supervisor/ Counselor         | 6/23/2026   | 7/24/2025  |
|               |             |            |  | R153148102  |            |
|               |             |            |  | 3           |            |
| Espinoza      | Patricia    | 1801678966 | Registered Alcohol and Drug Technician | 10/12/2025  | Y 9/6/2024 |
|               |             |            |  |             |            |
|               |             |            |  | CI 45421224 | Y          |
| Gaylor        | Joseph      | 1528721248 | Certified Alcohol and Drug Counselor   | 12/9/2026   | 7/24/2025  |
|               |             |            |  | R153877122  | Υ          |
| Harnden       | Christopher | 1689441297 | Registered Alcohol and Drug Technician | 3 12/4/2025 | 7/24/2025  |
|               |             |            | Substance Use Disorder Certified       | 14939       | Υ          |
| Huihui-Barker | Stephanie   | 166598652  | Counselor II                           | 7/12/2027   | 7/24/2025  |
|               |             |            | Substance Use Disorder Registered      | 14739       | Υ          |
| Jenkins       | Katie       | 1043911894 | Counselor                              | 2/1/2026    | 7/24/2025  |
|               |             |            | Substance Use Disorder Registered      | 12053       | Υ          |
| Joshan        | Solaiman    | 1114599677 | Counselor                              | 7/22/2026   | 7/24/2025  |
|               |             |            |  | R157321082  | Υ          |
| Laform        | Janell      | 1316777881 | Registered Alcohol and Drug Technician | 4 8/7/2026  | 7/24/2025  |
|               |             |            | Substance Use Disorder Registered      | 17341       | Υ          |
| Lovan         | Andre       | 1841055936 | Counselor                              | 2/9/2026    | 7/24/2025  |
|               |             |            | Substance Use Disorder Certified       |             |            |
| Luna          | Dalila      | 1306494836 | Counselor II                           | 9748        | Υ          |
|               |             |            | Substance Use Disorder Registered      | 19017       | Υ          |
| Luna          | Rhonda      | 1164243390 | Counselor                              | 8/12/2026   | 7/24/2025  |
|               |             |            |  | R143852072  | Y          |
| Maxey         | Heather     | 1104498658 | Registered Alcohol and Drug Technician | 1 7/14/2026 | 7/24/2025  |
|               |             |            |  | R150712052  | Υ          |
| Perkins       | Nathen      | 1770273641 | Certified Alcohol and Drug Counselor I | 3 6/4/2027  | 7/24/2025  |
|               |             |            |  | 24971       | Υ          |
| Richards      | Kathryn     | 1841084985 | Counselor                              | 9/12/2025   | 7/24/2025  |
|               |             |            |  | R157089072  | Υ          |
| Schneider     | Savannah    | 1588492227 | Registered Alochol and Drug Technician | 4 7/23/2026 | 7/24/2025  |

|   |                                  |  | Substance Use Disorder Certified                 | 7329                      | Υ              |  |  |
|---|----------------------------------|--|--|---------------------------|----------------|--|--|
| Sosa  | Hugo                             | 1497490627   | Counselor II                                     | 4/15/2026                 | 7/24/2025      |  |  |
| 3034  | Паво                             | 1437430027   |  | R159108122                | γ              |  |  |
| Towles  | Larae                            | 1437966066   | Registered Alcohol and Drug Technician           | 4 12/16/25                | 7/24/2025      |  |  |
| 1000163   | Larae                            | 113730000  | Registered Autorior and Brag Technician          | A100676                   | Υ              |  |  |
| Towns   | Mark                             | 1811183643   | Physician/Addiction Specialist                   | 12/31/2027                | 7/24/2025      |  |  |
| 1011115   | - Viai k                         | 1011100010   | Thysician, reduction opening                     | Ci31561220                | Υ              |  |  |
| Ulm   | Mathew                           | 1013402015   | Certified Alcohol and Drug Counselor I           | 12/7/2026                 | 7/24/2025      |  |  |
|   | - Viacine V                      | 1010 101010  | Continued and and and and and and and and and an | R153098102                | Υ Υ            |  |  |
| Woodworth   | Julia                            | 1699550889   | Registered Alochol and Drug Technician           | 3 6/9/2026                | 7/24/2025      |  |  |
| Program Name: N<br>Type of Program<br>Address: 1981 C<br>City: Stockton, CA | : SUD<br>herokee Road<br>A 95205 | 3.5 for residentia   |  | for outpatient an         | nd 3.1 and     |  |  |
| Phone Number:(2   | •                                |  | rices Provided: Yes                              |                           |                |  |  |
| Lingustic capabi<br>Interpreter service<br>for languages other              | es are available                 | Accepting New  |  | phore 2 NI/A              |                |  |  |
| C   |                                  | Accepting Children's Health Insurance Program (CHIP) Members? N/A  Populations served: Adults. |  |                           |                |  |  |
|   |                                  | Cultural Abilities:  |  |                           |                |  |  |
|   |                                  | Office Hours: Monday - Friday 8:00 am - 5:00 pm  |  |                           |                |  |  |
|   |                                  | website: www.newdirectionsstockton.org   |  |                           |                |  |  |
|   |                                  | Website. WWW.ii  | owan ootion ootookton.org                        |                           |                |  |  |
| Last Name   | First Name                       | NPI  | Type of License                                  | License #<br>and Exp Date | CC and<br>Date |  |  |
| Abitia  | Rita                             | 1356178438   | Case Worker                                      | 24935                     | Y 10/22/24     |  |  |
|   |                                  |  |  |                           | Y              |  |  |
| Apilado   | Jamie                            | 1356059901   | Case Worker                                      | 13974                     | 11/4/2024      |  |  |
| Bennet  | Calvin                           | 1831905868   | Case Worker                                      | 20127                     | Y<br>1/20/2025 |  |  |
| Carpenter   | Charles                          | 1457520462   | Medical Director                                 | A83564                    | N              |  |  |
| от ролго.   |                                  |  |  |                           |                |  |  |
| Dehn  | Samantha                         | 1487470944   | Case Worker                                      | 20175                     | Y 6/3/2025     |  |  |
|   |                                  |  |  |                           |                |  |  |
| Dixon   | Jeanette                         | 1063657757   | Counselor  | 8067                      | Y 12/12/24     |  |  |
|   |                                  |  |  |                           | Υ              |  |  |
| Flores  | Ricky                            | 1649003401   | Counselor  | 18738                     | 5/15/2025      |  |  |
|   |                                  |  |  |                           | Υ              |  |  |
| Gibson  | James                            | 1841908183   | Counselor  | 12191                     | 11/4/2024      |  |  |
|   |                                  |  |  |                           |                |  |  |

|         |          |            |                                      |             | T              |
|---------|----------|------------|--------------------------------------|-------------|----------------|
| Harper  | Greta    | 1265140511 | Case Worker                          | 14224       | Y 12/12/24     |
| Houser  | Kimberly | 1689382566 | Case Worker                          | 13976       | Y 11/15/24     |
|         |          |            |                                      |             | Υ              |
| Ibea    | Raquel   | 1255054276 | Case Worker                          | 13037       | 12/2/2024      |
| King    | Ruby     | 1972177665 | Senior Counselor                     | 8062        | Y<br>11/7/2024 |
| Liberty | Leslie   | 1427649318 | Licensed Clinical Social Worker      | 17173       | Y 11/12/24     |
|         |          |            |                                      |             | ,,             |
| Limas   | Richard  | 1518630953 | Counselor                            | 7346        | Y 11/12/24     |
|         |          |            |                                      |             | Υ              |
| Matas   | James    | 1639743974 | Counselor                            | 7267        | 11/5/2024      |
|         |          |            | Associate Marriage Family Therapist/ | Aii06328012 | Υ              |
| Mero    | Kathy    | 1316069495 | Counselor                            | 2           | 11/4/2024      |
| Morgan  | Emily    | 1215728258 | Case Worker                          | 19064       | Y 6/2/2025     |
|         |          |            |                                      |             | Υ              |
| Newton  | Deborah  | 1063086197 | SUD Counselor                        | 9469        | 11/7/2024      |
| Rice    | Debra    | 1124692991 | SUD Counselor                        | 8618        | Y<br>11/4/2024 |
| Rico    | Ethan    | 1659089902 | Case Worker                          | 14223       |                |
|         |          | 1039089902 | Case Worker                          | 14223       | Y 12/12/24     |
| Schopp  | Diane    | 1457925091 | SUD Counselor                        | 9781        | Y 11/25/24     |
| Sexton  | Timothy  | 1407529886 | SUD Counselor                        | 9517        | Y<br>11/6/2024 |
| ЭСХСОП  |          | 1407323000 | SOD COURSCION                        | 3317        | Υ              |
| Smith   | Denise   | 1932773579 | SUD Counselor                        | 7568        | 11/6/2024      |
| Vasquez | Tiffany  | 1891471777 | Case Worker                          | 15344       | Y 11/10/24     |
| Ybanez  | Elodia   | 1114606449 | Case Worker                          | 18765       | Y 11/12/24     |