

Behavioral Health Services

A Division of Health Care Services Agency

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

County and Contract Medi-Cal Providers Directory

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

This Document is Searchable

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

English

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

<u> 繁體中文(Chinese)</u>

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

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).

Revised 2/2025

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。

<u>Hmoob (Hmong)</u>

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

ਪੰਜਾਬੀ (Punjabi)

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

العربية (Arabic)

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

हिंदी (Hindi)

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

ภาษาไทย (Thai)

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

ខ្មែរ (Cambodian)

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

<u>ພາສາລາວ (Lao)</u>

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

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

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

MH = Mental Health Progam and Practitioners

SUD = Substance Use Disorder Program and Practitioners

 \triangle = Provider is accepting new beneficiaries

L= 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: A Care #39DH	ccess Managed		ion: Screenings for treatment of mental health symcerns, Case Management/Brokerage & Mental Hea	•	ſ		
Type of Program: M Address 620 N. Au City Stockton, CA 9							
Phone Number: (20	09) 468-9370	Populations serve	d: All ages				
△ &	·	Cultural Abilities: Culturally competent service provided to all callers.					
Non-English Langu	ages: Spanish and	Office Hours: Sun	day - Saturday 24 Hours per day, 365 days				
Interpreter Services	S	website: https://www.sjcbhs.org					
Last Name	First Name	NPI	Type of License	License #	CC		
Bagdonas	Michelle	1164765137	Substance Use Disorder Certified Counselor	7764	Υ		
Beas	Sandra	1821435447	Certified Alcohol and Drug Counselor	128141	Υ		
			SUD Certified Counselor II - Clinical				
Crummett	Tamara	1811037807	Supervisor	7541	Υ		
Garcia	Luis	1346599677	Licensed Marriage and Family Therapist	10398	Υ		
Guerrero	Melissa	1467946301	Licensed Marriage and Family Therapist	81226	Υ		
Martinez	Adriana	1831669480	Associate Clinical Social Worker	120727	Υ		
Morales	Michelle	1902397581	Substance Use Disorder Certified Counselor	14319	Υ		
Nease	Desiree	1447703491	Associate Clinical Social Worker	107413	Υ		
Richardson	Douglass	1609346402	Certified Alcohol and Drug Counselor III	3	Υ		
Wieland	Jessica	1164751392	Licensed Professional Clinical Counselor	173	Υ		
Program Name: B Community Outre Multicultural Serv Full Service Partn #9090. Type of Program: N Address 1212 N. C City Stockton, CAS	rach Program / rices. (BACOP/MC) rership (MHSA) MH ralifornia Street	Coordination (ICC);	ion: Case Management/ Brokerage including Inten Mental Health Services including Intensive Home Support; Crisis Intervention		ces		
Phone Number (20	9) 468-2337	Populations serve	d: Adults				
<u>ا</u> ف			African American, Native American, Muslim/Middle	Eastern and			
Non-English Langu Punjabi, Urdu, Pas	•	Office Hours:	Monday -Friday 8 am - 5 pm				
Spanish			w.sjcbhs.org/adult.aspx	ı			
Last Name	First Name	NPI	Type of License	License #	CC		
Cruz	Gloria	1104375724	Registered Nurse	723203	Υ		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ		
Program Name: C	ARES+		ion: Mental Health services, Case Management/Br ntal health symptoms to children, youth, and familion	~	enings		

Type of Program: M	H Program	community.			
Address 620 N. Aur City Stockton, CA 9	ora St. Ste 305 & 306 5202				
Phone Number: (20		Populations serve	d: Children and Youth		
<u>^</u>	,	Cultural Abilities: families that are se	Comprhensive Mental Health services provided for its and accomodating to the gender identification, generational, and physical needs of each individual to the services provided for its angle of the comprehensive services.	tion, sexual	th, and
Non-English Langua	ages:Spanish		day-Friday 8:00am-5:00pm .sjcbhs.org/children_and_youth.aspx		
Last Name	First Name	NPI	Type of License	License #	СС
Flores	Courtney	1851437735	Licensed Clinical Social Worker	29811	Y
Hudson	Mark	1528190725	Licensed Marriage and Family Therapist	78609	Y
Lopez	Alexis	1932767225	Licensed Marriage and Family Therapist	116153	Y
Program Name: Ch			n: Case Management/ Brokerage including Inten		<u> </u>
Address 1414 N Ca City Stockton, CA 9: Phone Number: (20	5202	Cultural Abilities: families living in Ce	ed: Children and Youth Comprehensive mental health services for childrentral County area. Services include individual and		
۵ ن ے			hiatric assessment, and medication support.		
Non-English Langua	ages: Spanish		day - Friday 8 am to 5 pm w.sjcbhs.org/children_and_youth.aspx		
Last Name	First Name	NPI	Type of License	License #	СС
Abdullahi	Krissie	1407307762	Associate Marriage and Family Therapist	125000	Υ
Alban	Benjamin	1932227295	Licensed Clinical Social Worker	26094	Υ
Allanki	Sailaja	1306897723	Physician	138838	Υ
Avilla	Eugene	1073396560	N/A	N/A	N
Barajas	Lauren	1154893683	Licensed Clinical Social Worker	214887	Υ
Boklund	Maria	1396157061	Licensed Marriage and Family Therapist	48496	Υ
Corral	Mercedes	1104583996	Associate Marriage and Family Therapist	135632	Υ
Curtiss	Megan	1265836027	Licensed Marriage and Family Therapist	123655	Υ
Demers	Jenifer	1386124436	Associate Clinical Social Worker	114558	Υ
Dhillon	Gipanjot	1013446046	Physician	A21935	Υ
Diaz	David	1821585308	Licensed Marriage and Family Therapist	129095	N
Gonzale-Barragen	Stephanie	1538808266	Associate Marriage and Family Therapist	142162	Υ
Hall	Tondria	1770160152	Associate Professional Clinical Counselor	13978	Υ
Hudson	Mark	1528190725	Licensed Marriage and Family Therapist	78609	Υ
Kumar	Gaurav	1235513102	Physician	A151187	Υ
	Alexis	1932767225	Associate Marriage and Family Therapist	116153	

Martin	Alandrea	1235696006	Licensed Marriage and Family Therapist	131594	Υ
Navarro	Elizabeth	1801242771	Associate Clinical Social Worker	103985	Y
Reyes	Irene	1760189534	Associate Clinical Social Worker	111415	N
Rhone	Danevia	1114650405	Associate Clinical Social Worker	99638	Y
Saluja	Amandeep	1588894778	Physician	C175781	N
Santiago	Regina	1598166308	Licensed Clinical Social Worker	110173	Y
Shah	Benita	1407311103	Associate Social Worker	125290	Y
Simien	Carla	1629564000	Licensed Psychiatric Technician	40771	Y
Soeun	Garo	1326755794	Associate Clinical Social Worker	116905	Y
Tiano	Mark	1841623535	Licensed Clinical Social Worker	88442	Y
Tiano	IVIAIK	1841023333	Licensed Clinical Social Worker	00442	'
Washington	Kerry	1689391997	Registered Nurse	RN5599310	Υ
White	Grace	1659146371	Associate Clinical Social Worker	113407	Y
Yang	Mai	1447866090	Associate Clinical Social Worker	105295	Y
Program Name: C			tion: Case Management/Brokerage including In		'
Services - Foster			,Mental Health Services including Intensive Home		s
Partnership (MHS		` '	Support; Crisis Intervention		
Type of Program: N	•	(= 0),			
Address : 620 N. A					
City: Stockton, CA		Denulations com	1.0131		
Phone Number: (20	19) 400-2300		ed: Children and Youth		
,	19) 400-2303	Cultural Abilities:	Mental Health Services Act (MHSA) program foc	used on children	and
	9) 400-2303		Mental Health Services Act (MHSA) program foc	used on children	and
,	,	Cultural Abilities: youth in the Foster Office Hours: Mor	Mental Health Services Act (MHSA) program foc Care System nday - Friday 8:00 am - 5:00 pm	used on children	and
△ &	,	Cultural Abilities: youth in the Foster Office Hours: Mor	Mental Health Services Act (MHSA) program foc Care System	used on children	and
△ &	,	Cultural Abilities: youth in the Foster Office Hours: Mor	Mental Health Services Act (MHSA) program foc Care System nday - Friday 8:00 am - 5:00 pm	used on children	and
் ட் Non-English Langu	ages: Spanish	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww	Mental Health Services Act (MHSA) program foc Care System nday - Friday 8:00 am - 5:00 pm w.sjcbhs.org/children_and_youth.aspx		
∩ 년 Non-English Langu Last Name	ages: Spanish First Name	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI	Mental Health Services Act (MHSA) program foctors are System nday - Friday 8:00 am - 5:00 pm www.sjcbhs.org/children_and_youth.aspx Type of License	License #	СС
∩	ages: Spanish First Name Sailaja	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www NPI 1306897723	Mental Health Services Act (MHSA) program foctors are System Inday - Friday 8:00 am - 5:00 pm Inday - Frid	License # 138838	CC Y
Non-English Langu Last Name Allanki Ansari	ages: Spanish First Name Sailaja Shaukat Lauren	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI 1306897723 1821294455	Mental Health Services Act (MHSA) program foce Care System nday - Friday 8:00 am - 5:00 pm w.sjcbhs.org/children_and_youth.aspx Type of License Physician Physician	License # 138838 105923	CC Y Y
Non-English Langu Last Name Allanki Ansari Barajas	ages: Spanish First Name Sailaja Shaukat	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI 1306897723 1821294455	Mental Health Services Act (MHSA) program foce Care System nday - Friday 8:00 am - 5:00 pm w.sjcbhs.org/children_and_youth.aspx Type of License Physician Physician	License # 138838 105923	CC Y Y
Non-English Langu Last Name Allanki Ansari Barajas Castaneda-	ages: Spanish First Name Sailaja Shaukat Lauren	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI 1306897723 1821294455 1154893683	Mental Health Services Act (MHSA) program foce Care System nday - Friday 8:00 am - 5:00 pm w.sjcbhs.org/children_and_youth.aspx Type of License Physician Physician Licensed Clinical Social Worker	License # 138838 105923 101688	CC Y Y
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen	ages: Spanish First Name Sailaja Shaukat Lauren Renessa	Cultural Abilities: youth in the Foster Office Hours: More website: https://www NPI 1306897723 1821294455 1154893683	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688	CC Y Y Y
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit	First Name Sailaja Shaukat Lauren Renessa Christy	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www.npl 1306897723 1821294455 1154893683 1376664862 1386286383	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www. NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681 1619515640	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167 130181	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez Gomez-Boulware	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria Salena	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681 1619515640 1679098776	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167 130181	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez Gomez-Boulware	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria Salena Antonio	Cultural Abilities: youth in the Foster Office Hours: More website: https://www NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681 1619515640 1679098776 1023473469	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167 130181 139138 71535	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez Gomez-Boulware Gutierrez Herron	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria Salena Antonio Rita	Cultural Abilities: youth in the Foster Office Hours: Mor website: https://ww NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681 1619515640 1679098776 1023473469 1659629285	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167 130181 139138 71535 117262	СС
Non-English Langu Last Name Allanki Ansari Barajas Castaneda- Jensen Cupit Del Toro Dominguez Gomez-Boulware Gutierrez Herron Lopez	First Name Sailaja Shaukat Lauren Renessa Christy Jose Maria Salena Antonio Rita Alexis	Cultural Abilities: youth in the Foster Office Hours: Morwebsite: https://www. NPI 1306897723 1821294455 1154893683 1376664862 1386286383 1578058681 1619515640 1679098776 1023473469 1659629285 1932767225	Mental Health Services Act (MHSA) program foce Care System Inday - Friday 8:00 am - 5:00 pm Inday	License # 138838 105923 101688 81528 120662 120167 130181 139138 71535 117262 141235	СС

Sanchez	Luis	1982395760	Associate Clinical Social Worker	119854	Υ
Program Name: \$	S.J.C. Children and	Program Descrip	tion: Case Management/Brokerage including In	tensive Care	
_	Foster Youth Full	Coordination (ICC),Mental Health Services including Intensive Home	e Based Service	S
Service Partners	hip Intake (MHSA)	(IHBS); Medication	n Support; Crisis Intervention		
#39DF					
Type of Program:	MH				
Address: 333 E. V					
City: Stockton, CA	~				
Phone Number: (209) 468-1547		Populations serv	ed: Children and Youth		
THORIO INGINIDOT: (2	.00) 100 1011		: Mental Health Services Act (MHSA) program foc	used on childre	n and
, L		youth in the Foste	, , , ,	asca on onliare	ii aiia
△ &		•	<u> </u>		
Non-English Lang	uages: Spanish		nday - Friday 8:00 am - 5:00 pm		
	_	·	vw.sjcbhs.org/children_and_youth.aspx	_	
Last Name	First Name	NPI	Type of License	License #	CC
Alvarado	Jorie Mae	1760156640	Associate Clinical Social Worker	125696	Υ
Blanco Herrada	Clara	1679823900	Licensed Marriage and Family Therapist	146299	Υ
Dominguez	Maria	1619515640	Associate Marriage and Family Therapist	130181	Υ
Heidenberg	Bradley	1255764627	Licensed Marriage and Family Therapist	98495	Υ
Hernandez	Lea	1063171676	Licensed Clinical Social Worker	104626	Υ
Morris	Allie	1982305165	Associate Marriage and Family Therapist	136814	Υ
Pollock	Leora	1245663426	Licensed Clinical Social Worker	75192	Υ
Sanchez	Luis	1982395760	Associate Clinical Social Worker	119854	Υ
Program Name: (Community Adult	Program Descrip	tion: Case Management/ Brokerage including Inte	ensive Care	
Treatment Service	es (CATS - Teams A,	Coordination (ICC); Mental Health Services including Intensive Hom	ne Based Service	es
B , and D) #9069		(IHBS); Medication	n Support; Crisis Intervention		
,					
Type of Program:	MH				
,					
Type of Program:	California Street				
Type of Program: Address: 1212 N.	California Street 95202	Populations serv	ed: Adult		
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 95202	-	ed: Adult : Comprehensive Mental Health Services for adult	s (18-60). Servi	ces
Type of Program: Address: 1212 N. City: Stockton, CA	California Street 95202	Cultural Abilities		` '	
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 95202	Cultural Abilities include psychiatric	: Comprehensive Mental Health Services for adult	` '	
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 3 95202 209) 468-8842;	Cultural Abilities include psychiatric management.	: Comprehensive Mental Health Services for adult	` '	
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 3 95202 209) 468-8842;	Cultural Abilities include psychiatric management. Office Hours: Mo	: Comprehensive Mental Health Services for adult assessment, medication support, group, individua	` '	
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 3 95202 209) 468-8842;	Cultural Abilities include psychiatric management. Office Hours: Mo	: Comprehensive Mental Health Services for adult c assessment, medication support, group, individua nday - Friday 8:00 am - 5:00 pm	` '	
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2	California Street 3 95202 209) 468-8842; uages: Spanish,	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://ww	: Comprehensive Mental Health Services for adult cassessment, medication support, group, individuanday - Friday 8:00 am - 5:00 pm vw.sjcbhs.org/adult.aspx	al therapy and c	ase
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2 Non-English Lang Last Name	California Street v 95202 209) 468-8842; uages: Spanish, First Name	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://www.NPI	: Comprehensive Mental Health Services for adults assessment, medication support, group, individual anday - Friday 8:00 am - 5:00 pm www.sjcbhs.org/adult.aspx Type of License	License #	cc
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2 Non-English Lang Last Name Aguirre Luna	California Street v 95202 209) 468-8842; uages: Spanish, First Name Mayra	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://www.NPI 1285007179	c Comprehensive Mental Health Services for adult c assessment, medication support, group, individual anday - Friday 8:00 am - 5:00 pm www.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	License #	CC Y
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2 Non-English Lang Last Name Aguirre Luna Amador	California Street v 95202 209) 468-8842; uages: Spanish, First Name Mayra Keith	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://www.NPI 1285007179 1891127403	: Comprehensive Mental Health Services for adult assessment, medication support, group, individual anday - Friday 8:00 am - 5:00 pm ww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist	License # 144333 102725	CC Y Y
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2 Non-English Lang Last Name Aguirre Luna Amador Chavez	California Street A 95202 209) 468-8842; uages: Spanish, First Name Mayra Keith April	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://www.npi 1285007179 1891127403 1760959670	Comprehensive Mental Health Services for adult assessment, medication support, group, individual and Friday 8:00 am - 5:00 pm ww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	License # 144333 102725 113250	CC Y Y Y
Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2 Non-English Lang Last Name Aguirre Luna Amador Chavez Cholua	California Street A 95202 209) 468-8842; uages: Spanish, First Name Mayra Keith April Marie	Cultural Abilities include psychiatric management. Office Hours: Mowebsite: https://www.npl 1285007179 1891127403 1760959670 1275098055	c Comprehensive Mental Health Services for adult c assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for a support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment, medication support, group, individual and responsible for adult assessment and responsible for adult and respon	License # 144333 102725 113250 139853	CC Y Y Y Y Y

Ekpkai	Tsola	1518603927	Associate Clinical Social Worker	94485	Υ
Flores	Henry	1998038657	Licensed Marriage and Family Therapist	128269	Υ
Garcia	Valerie	1770606386	Registered Nurse	704233	Υ
Gementera	Jalessa	1588134209	Associate Marriage and Family Therapist	118468	Υ
Graff	Robert	1366560112	Physician	G70479	Υ
Helsby	Sherri	1669893764	Licensed Clinical Social Worker	29248	Υ
Hensley	Zachary	1265039226	Licensed Marriage and Family Therapist	143253	Υ
Herrera	Karla	1427722461	Associate Professional Clinical Counselor	102359	Υ
Herrick	Kara	1518191659	Licensed Marriage and Family Therapist	43283	Υ
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ
Hudson	Dana	1225172489	Licensed Marriage and Family Therapist	6556	Υ
Jackson	Sasha	1295181295	Licensed Clinical Social Worker	79996	Υ
Jonney	Jorly	1902155625	Licensed Clinical Social Worker	65763	Υ
Lee	Mai	1770282824	Associate Clinical Social Worker	123987	Υ
Martin	Ronee	1932644796	Associate Marriage and Family Therapist	84987	Υ
Martinez	Celeste	1902305972	Licensed Psychiatric Technician	40655	Υ
Mascovich	Paul	1215921184	Physician	G33950	Υ
McHenry	Heidi	1861763294	Licensed Psychiatric Technician	35949	Υ
Mendez	Adeline	1255453353	Licensed Psychiatric Techician	25868	Υ
Murray	Karen	1346735917	Licensed Marriage and Family Therapist	138441	Υ
Padala	Nagamani	1659303253	Physician	C53554	Υ
Perera	Manoj	1568470946	Licensed Clinical Social Worker	24260	Υ
Phillips	Victoria	1871110437	Associate Clinical Social Worker	92751	Υ
Saddik	Fouad	1437254117	Physician	A44865	Υ
Saelee	Cindy	1255511614	Licensed Clinical Social Worker	82456	Υ
Salazar	Kellie	1295273654	Licensed Psychiatric Technician	40326	Υ
Schmidt	Katarzyna	1285290346	Associate Marriage and Family Therapist	130542	Υ
Soares	Ana	1922191410	Physician	A68523	Υ
Sprague	Helen	1710325642	Licensed Marriage and Family Therapist	75120	Υ
Velasquez	Normita	1609464114	Licensed Psychiatric Techician	41847	Υ
Washington	Lorraine	1639722820	Associate Marriage and Family Therapist	127280	Υ
Weekly	Tony	1710572540	Licensed Psychiatric Technician	41837	Υ
Williams	Showvon	1689133464	Associate Professional Clinical Counselor	14222	Υ
Windham	Melissa	1922744838	Associate Clinical Social Worker	119831	Υ
Zaragoza	Alejandra	1346705381	Associate Marriage and Family Therapist	137454	Υ
Program Name:	Community	Program Descrip	otion: Case Management/ Brokerage; Mental Hea	Ith Services;	
Corrections Par	tnership #39AP	Medication Suppo	ort; Crisis Intervention		
Type of Program	: MH				
	. California Street				
City: Stockton, Ca					
•	(209) 468-9373	Populations ser	ved: Adult		

<u>ا</u> لج			Serve clients under AB-109 community supervise, promote wellness and recovery, and increase sa		
	nguages: Spanish	Office Hours:	Monday - Friday 8:00 am - 5:00 pm		
J	,	website: https://w	ww.sjcbhs.org/adult.aspx		
Last Name	First Name	NPI	Type of License	License #	СС
Garcia	Julio	1679961106	Licensed Marriage and Family Therapist	108163	Υ
Molina	Rico	1255454203	Licensed Clinical Social Worker	25450	Υ
Trahan	Roslyn	1639839608	Licensed Professional Clinical Counselor	12474	Υ
Program Name	: Crisis Community	Program Descrip	otion: Case Management/ Brokerage; Mental H	ealth Services;	
_	m (CCRT) #9088		ort; Crisis Intervention		
Type of Progran Address: 1212 N City: Stockton, C Phone Number:	N. California Street CA 95202	Populations ser	ved: Adult, Children, Adolescents		
∩ Ł , Non-English Lar	nguages: Spanish,				
Cambodian, Vie			ww.sjcbhs.org/crisis_intervention.aspx		
Last Name	First Name	NPI	Type of License	License #	СС
Alejo	Stephanie	1659798130	Licensed Psychiatric Technician	37033	Υ
Arriola	Eulalie	1255573044	Licensed Psychiatric Technician	34426	Υ
Avelar	Natalie	1801524657	Associate Clinical Social Worker	120140	Υ
Ballesteros	Patricia	1790058352	Licensed Marriage and Family Therapist	108455	Υ
	Melissa	1972944072	Licensed Psychiatric Technician	36496	Υ
Bazua			•		
	Jeff	1043753478	Licensed Psychiatric Technician	40284	Υ
Bazua Bareng Blewett	Jeff Jenna	1043753478 1437658408	Licensed Psychiatric Technician Licensed Marriage and Family Therapist	40284 136866	Y
Bareng			Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist		+
Bareng Blewett	Jenna	1437658408	Licensed Marriage and Family Therapist	136866	Υ
Bareng Blewett Bringas	Jenna Carmencita	1437658408 1821298753	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist	136866 53691	Y
Bareng Blewett Bringas DeJesus	Jenna Carmencita Carolyn	1437658408 1821298753 1861650228	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician	136866 53691 34221	Y Y Y
Bareng Blewett Bringas DeJesus Douglas	Jenna Carmencita Carolyn Roy	1437658408 1821298753 1861650228 1407229248	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker	136866 53691 34221 98897	Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada	Jenna Carmencita Carolyn Roy Moses	1437658408 1821298753 1861650228 1407229248 1255045726	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician	136866 53691 34221 98897 32526	Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa	Jenna Carmencita Carolyn Roy Moses Carlos	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist	136866 53691 34221 98897 32526 102315	Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia	Jenna Carmencita Carolyn Roy Moses Carlos Frank	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist	136866 53691 34221 98897 32526 102315 118171	Y Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill	Jenna Carmencita Carolyn Roy Moses Carlos Frank Sandeep	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1871852673	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Psychiatric Technician	136866 53691 34221 98897 32526 102315 118171 34942	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill Guzman	Jenna Carmencita Carolyn Roy Moses Carlos Frank Sandeep Omar	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1871852673 1558832712	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker	136866 53691 34221 98897 32526 102315 118171 34942 108999	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill Guzman Isham	Jenna Carmencita Carolyn Roy Moses Carlos Frank Sandeep Omar Loni	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1871852673 1558832712 1891145033	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician	136866 53691 34221 98897 32526 102315 118171 34942 108999 37210	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill Guzman Isham Ketcham	Jenna Carmencita Carolyn Roy Moses Carlos Frank Sandeep Omar Loni Shauna	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1871852673 1558832712 1891145033 1841798865	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Clinical Social Worker	136866 53691 34221 98897 32526 102315 118171 34942 108999 37210 99975	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bareng Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill Guzman Isham Ketcham Lee	Jenna Carmencita Carolyn Roy Moses Carlos Frank Sandeep Omar Loni Shauna Catherine	1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1871852673 1558832712 1891145033 1841798865 1073729646	Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychaitric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Clinical Social Worker Licensed Marriage and Family Therapist	136866 53691 34221 98897 32526 102315 118171 34942 108999 37210 99975 44225	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

108999

Menius	Victoria	1407074250	Liconcod Dayahistria Tashrisian	27524	V		
		1487074258	Licensed Psychiatric Technician	37534	Y		
Melgarejo	Angie	1891220729	Associate Professional Clinical Counselor	6643	Y		
Molina Eliab	Sonya	1497878482	Licensed Marriage and Family Therapist	109801	Υ		
Morales	Leonardo	1962822643	Licensed Clinical Social Worker	100000	Υ		
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Υ		
				CO5667051			
Pate	Kellie	1609248368	Substance Abuse Counselor II	8	Υ		
Phillips	Heather	114530250	Licensed Psychatric Technician	41710	Υ		
Price	Jennifer	1932621893	Licensed Psychiatric Technician	40662	Υ		
Scharp	Sam	1508526856	Licensed Psychiatric Technician	42150	Υ		
Sumampong	Criselle	1073121414	Licensed Psychiatric Technician	41696	Υ		
Tabinas	Vianny Gieng	1770204679	Associate Clinical Social Worker	124868	Υ		
Valenzuela	Maira	1093221087	Associate Clinical Social Worker	102953	Υ		
Walsh	Peter	1134570542	Associate Marriage and Family Therapist ption: Case Management/ Brokerage; Mental Hea	131513	Υ		
Services #901 Type of Program: Address: 1212 N. City: Stockton, C.	: MH . California Street		ort; Crisis Intervention				
Phone Number: (209) 468-8686	Populations ser	ved: Adult, Children Adolescents				
<u>^</u> Ł			Cultural Abilities: 24-Hour evaluation services including assessment for psychiatric emergencies, crisis counseling, outpatient and community referrals.				
		emergencies, cris	sis counseling, outpatient and community referrals.				
	guages: Spanish,	Office Hours: Of	PEN 24 HOURS				
Non-English Lanç Cambodian, Vietr	•	Office Hours: Of					
	•	Office Hours: Of	PEN 24 HOURS	License #	СС		
Cambodian, Vietr	namese	Office Hours: Of website: https://w	PEN 24 HOURS ww.sjcbhs.org/crisis_intervention.aspx	License # 37033	CC Y		
Cambodian, Vietr Last Name	First Name	Office Hours: Of website: https://w	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License				
Cambodian, Vietr Last Name Alejo	First Name Stephanie	Office Hours: OF website: https://w NPI 1659798130	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician	37033	Υ		
Cambodian, Vietr Last Name Alejo Arriola	First Name Stephanie Eulalie	Office Hours: Of website: https://w NPI 1659798130 1255573044	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician	37033 34426	Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar	First Name Stephanie Eulalie Natalie	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker	37033 34426 120140	Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng	First Name Stephanie Eulalie Natalie Jeff	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician	37033 34426 120140 40284	Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros	First Name Stephanie Eulalie Natalie Jeff Patricia	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Marriage and Family Therapist	37033 34426 120140 40284 108455	Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician	37033 34426 120140 40284 108455 36496	Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Marriage and Family Therapist	37033 34426 120140 40284 108455 36496 136866	Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist	37033 34426 120140 40284 108455 36496 136866 53691	Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228	PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician	37033 34426 120140 40284 108455 36496 136866 53691 34221	Y Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus Douglas	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn Roy	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228 1407229248	PEN 24 HOURS ww.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker	37033 34426 120140 40284 108455 36496 136866 53691 34221 98897	Y Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus Douglas Estrada	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn Roy Moses	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228 1407229248 1255045726	Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician	37033 34426 120140 40284 108455 36496 136866 53691 34221 98897 32526	Y Y Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus Douglas Estrada Figueroa	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn Roy Moses Carlos	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228 1407229248 1255045726 1306193933	Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Marriage and Family Therapist	37033 34426 120140 40284 108455 36496 136866 53691 34221 98897 32526 102315	Y Y Y Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn Roy Moses Carlos Frank	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352	Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist	37033 34426 120140 40284 108455 36496 136866 53691 34221 98897 32526 102315 118171	Y Y Y Y Y Y Y Y Y		
Cambodian, Vietr Last Name Alejo Arriola Avelar Bareng Ballesteros Bazua Blewett Bringas DeJesus Douglas Estrada Figueroa Garcia Gill	First Name Stephanie Eulalie Natalie Jeff Patricia Melissa Jenna Carmencita Carolyn Roy Moses Carlos Frank Paramijit	Office Hours: Of website: https://w NPI 1659798130 1255573044 1801524657 1043753478 1790058352 1972944072 1437658408 1821298753 1861650228 1407229248 1255045726 1306193933 1992179352 1073629218	Type of License Licensed Psychiatric Technician Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Marriage and Family Therapist Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Psychiatric Technician Licensed Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Marriage and Family Therapist Physician	37033 34426 120140 40284 108455 36496 136866 53691 34221 98897 32526 102315 118171 A49224	Y Y Y Y Y Y Y Y Y		

Associate Clinical Social Worker

158832712

Omar

Guzman

Isham	Loni	1891145033	Licensed Psychiatric Technician	38233	Υ
Ketcham	Shauna	1841798865	Licensed Clinical Social Worker	99975	Υ
Lee	Catherine	1073729646	Licensed Marriage and Family Therapist	44225	Υ
Lewis	Chandra	1770914061	Licensed Psychiatric Technician	37210	Υ
Lewman	Brenda	1821477035	Licensed Marriage and Family Therapist	106905	Υ
McArthur	Milagros	1477809929	Licensed Psychiatric Technician	36471	Υ
Melgarejo	Angie	1891220729	Associate Professional Clinical Counselor	6643	Υ
Menius	Victoria	1487074258	Licensed Psychiatric Technician	37534	Υ
Molina Eliab	Sonya	1497878482	Licensed Marriage and Family Therapist	109801	Υ
Morales	Leonardo	1962822643	Licensed Clinical Social Worker	100000	Υ
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Υ
				CO5667051	
Pate	Kellie	1609248368	Substance Abuse Counselor II	8	Υ
Phillips	Heather	114530250	Licensed Psychiatric Technician	41710	Υ
Price	Jennifer	1932621893	Licensed Psychiatric Technician	40662	Υ
Scharp	Sam	1508526856	Licensed Psychiatric Technician	42150	Υ
Sumampong	Criselle	1073121414	Licensed Psychiatric Technician	41696	Υ
Tabinas	Vianny Gieng	1770204679	Associate Clinical Social Worker	124868	Υ
Tupper	Charles	1700944121	Physician	G185940	Υ
		1002221007	Acceptate Clinical Copial Manhan	102953	Υ
Valenzuela	Maira	1093221087	Associate Clinical Social Worker	102955	-
Walsh Program Name: Units (CSU) #90	Peter Crisis Stabilization	1134570542	Associate Clinical Social Worker Associate Marriage and Family Therapist otion: Crisis Stabilization CSU	131513	Υ
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N.	Peter Crisis Stabilization 032 : MH . California Street	1134570542	Associate Marriage and Family Therapist		
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA	Peter Crisis Stabilization 032 : MH . California Street A 95202	1134570542 Program Descrip	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU		
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N.	Peter Crisis Stabilization 032 : MH . California Street A 95202	Populations servicular Abilities	Associate Marriage and Family Therapist	131513	Υ
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (200	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686	Populations servicular Abilities	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU /ed: Adult, Adolescents (12 yrs. or older) :: 23-Hour psychiatric assessment and stabilization /ided during admission and upon discharge.	131513	Υ
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (a	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686	Program Descrip Populations serve Cultural Abilities Referrals are provided to the control of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU /ed: Adult, Adolescents (12 yrs. or older) :: 23-Hour psychiatric assessment and stabilization /ided during admission and upon discharge.	131513	Υ
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (S	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686	Program Descrip Populations serve Cultural Abilities Referrals are provided to the control of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS	131513	Υ
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (2) \(\text{\text{C}} \) Non-English Lang Cambodian, Vietr	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese	Program Descrip Populations serve Cultural Abilities Referrals are provided to the company of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU /ed: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization yided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx	n unit. Resource	s and
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (I) \(\text{\text{C}} \) Non-English Lang Cambodian, Vietr Last Name	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name	Program Descrip Populations serve Cultural Abilities Referrals are provided to the company of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) s: 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License	131513 n unit. Resource	s and
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (SA Non-English Lang Cambodian, Vietr Last Name Andrade	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar	Program Descrip Populations serve Cultural Abilities Referrals are provided to the company of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU /ed: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician	131513 n unit. Resource License # 42243	s and
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (a) Non-English Lang Cambodian, Vietr Last Name Andrade Arroyo	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth	Program Descrip Populations serve Cultural Abilities Referrals are prove Office Hours: OF website: https://w NPI 1215661145 1255459061	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) s: 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse	131513 n unit. Resource License # 42243 488617	s and CC Y Y
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (S Non-English Lang Cambodian, Vietr Last Name Andrade Arroyo Bareng	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth Jeff	Program Descrip Populations serve Cultural Abilities Referrals are provided to the company of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU /ed: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization //ded during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse Licensed Psychiatric Technician	License # 42243 488617 40284	s and CC Y Y Y
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (a) Non-English Lang Cambodian, Vietr Last Name Andrade Arroyo Bareng Bokleman	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth Jeff Roy	Program Descrip Populations serve Cultural Abilities Referrals are prove Office Hours: OFfice Hours: OFfice Hours: MPI 1215661145 1255459061 1043753478 11404003	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) s: 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse Licensed Psychiatric Technician Licensed Psychiatric Technician	License # 42243 488617 40284 32628	s and CC Y Y Y Y
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (SA Non-English Lang Cambodian, Vietr Last Name Andrade Arroyo Bareng Bokleman Brown	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth Jeff Roy Brandi	Program Descrip Populations serve Cultural Abilities Referrals are provided to the control of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse Licensed Psychiatric Technician Licensed Psychiatric Technician Registered Nurse	License # 42243 488617 40284 32628 713008	s and CC Y Y Y Y Y
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (a) Non-English Lang Cambodian, Vietr Last Name Andrade Arroyo Bareng Bokleman Brown Cabrera	Peter Crisis Stabilization 032 : MH . California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth Jeff Roy Brandi Gilbert	Program Descrip Populations serve Cultural Abilities Referrals are provided to the control of t	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) s: 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse Licensed Psychiatric Technician Registered Nurse Registered Nurse Registered Nurse Registered Nurse Licensed Psychiatric Technician	License # 42243 488617 40284 32628 713008 565185	s and CC Y Y Y Y Y Y
Walsh Program Name: Units (CSU) #90 Type of Program: Address: 1212 N. City: Stockton, CA Phone Number: (a) Cambodian, Vietr Last Name Andrade Arroyo Bareng Bokleman Brown Cabrera Chavez	Peter Crisis Stabilization 032 MH California Street A 95202 209) 468-8686 guages: Spanish, namese First Name Oscar Maria Elizabeth Jeff Roy Brandi Gilbert Justin	Program Descrip Populations serve Cultural Abilities Referrals are prove Office Hours: OF website: https://w NPI 1215661145 1255459061 1043753478 11404003 1316060023 1679693766 1396479606	Associate Marriage and Family Therapist otion: Crisis Stabilization CSU ved: Adult, Adolescents (12 yrs. or older) 23-Hour psychiatric assessment and stabilization vided during admission and upon discharge. PEN 24 HOURS www.sjcbhs.org/crisis_intervention.aspx Type of License Licensed Psychiatric Technician Registered Nurse Licensed Psychiatric Technician Registered Nurse Registered Nurse Registered Nurse Registered Nurse	License # 42243 488617 40284 32628 713008 565185 42379	S and CC Y Y Y Y Y Y Y

Garcia	Francisco	1538899620	Licensed Psychiatric Technician	42266	Υ
Garcia	Jazmin	1225763642	Licensed Psychiatric Technician	42290	Υ
Graff	Robert	1366560112	Physician	G70479	Υ
Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Υ
Hawkins	Lynnetta	1437436938	Licensed Marriage and Family Therapist	93110	Υ
Holguin	Gabriel	1255704094	Licensed Psychiatric Technician	38216	Υ
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Υ
Kaur	Narinder	1063006294	Licensed Psychiatric Technician	41886	Υ
Kottke	Marline	1891223111	Licensed Vocational Nurse	198957	Υ
Laizer	Gloria	1255706479	Registered Nurse	764452	Υ
Lambert	Rekha	1164647525	Licensed Marriage and Family Therapist	10386	Υ
Little	Christy	1497978795	Licensed Psychiatric Technician	28731	Υ
Lo	Muacong	1689300857	Licensed Psychiatric Technician	42402	Υ
Lo	Pa	1295377117	Licensed Psychiatric Technician	41128	Υ
Maldonado	Adan	1063878825	Licensed Marriage and Family Therapist	139560	Υ
Martin	Kaitlyn	1548959802	Licensed Psychiatric Technician	42399	Υ
Mendoza	Michelle	1477951812	Registered Nurse	797022	Υ
Michael	Kimberly	1538831151	Licensed Psychiatric Technician	29086	Υ
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Υ
Montantes	Michael	1780018390	Associate Marriage and Family Therapist	146645	Υ
Navarro	Grace	1083737753	Licensed Clinical Social Worker	91433	Υ
Nguyen	Thao	1912214065	Licensed Marriage and Family Therapist	88176	Υ
Nguyen	Thao	1912214065	Licensed Professional Clinical Counselor	2720	Υ
Pate	Kellie			CO5667051	
rate	Keille	1609248368	Substance Abuse Counselor II	8	Υ
Rios	Teri	1942323829	Licensed Psychiatric Technician	29213	Υ
Sahota	Mandeep	1609536994	Registered Nurse	831415	Υ
Salon	Jennifer	1730702119	Licensed Psychiatric Technician	41462	Υ
Seraypheap	Arunny	1013037274	Registered Nurse	547944	Υ
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Υ
Smith	Maria	1821624156	Licensed Psychiatric Technician	41522	Υ
Sous-Figueroa	Sokchear	1316187362	Registered Nurse	95268104	Υ
Stephens	Julie	1376678722	Associate Marriage and Family Therapist	134410	Υ
Stephens	Julie	1376678722	Associate Professional Clinical Counselor	12831	Υ
Tran	Michelle	1366642068	Licensed Clinical Social Worker	81278	Υ
Tuning	Frankie	1073631727	Registered Nurse	95171895	Υ
Tupper	Charles	1700944121	Physician	G185940	Υ
Vang	Mai	1982103081	Licensed Psychiatric Technician	40697	Υ
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	Υ
Villasenor	Kendra	1447518204	Licensed Psychiatric Technician	36449	Υ

口 长 Non-English Lang Last Name Resendez	First Name Cynthia Housing Services MH California Street	website: https://w NPI 1780877845 Program Descripe Intervention Populations serve	rww.sjcbhs.org/adult.aspx Type of License Physician ption: Case Management/ Brokerage; Mental Hea		CC Y sis
Non-English Lang Last Name Resendez Program Name: I #39BE Type of Program: Address: 1212 N (City: Stockton, CA)	First Name Cynthia Housing Services MH California Street	website: https://w NPI 1780877845 Program Descrip Intervention	Type of License Physician ption: Case Management/ Brokerage; Mental Hea	A84098	Υ
Non-English Lang Last Name Resendez Program Name: I #39BE Type of Program: Address: 1212 N 0	First Name Cynthia Housing Services MH California Street	website: https://w NPI 1780877845 Program Descri	www.sjcbhs.org/adult.aspx Type of License Physician	A84098	Υ
Non-English Lang Last Name Resendez Program Name: I	First Name Cynthia Housing Services	website: https://w NPI 1780877845 Program Descri	www.sjcbhs.org/adult.aspx Type of License Physician	A84098	Υ
Non-English Lang Last Name Resendez Program Name: I	First Name Cynthia	website: https://w NPI 1780877845 Program Descri	www.sjcbhs.org/adult.aspx Type of License Physician	A84098	Υ
口 长 Non-English Lang Last Name Resendez	First Name Cynthia	website: https://w NPI 1780877845	www.sjcbhs.org/adult.aspx Type of License Physician	A84098	Υ
் <u>டூ</u> Non-English Lang Last Name	First Name	website: https://w	ww.sjcbhs.org/adult.aspx Type of License		
் <u>ட</u> ூ Non-English Lang		website: https://w	ww.sjcbhs.org/adult.aspx	license #	
۵ ج	uages: Spanish				
۵ ج		Office Hours: Mo	onday - Friday 8:00 am- 5:00 pm		
Phone Number: (2			er adult population ages (60+)		
Flove Milmber, 17	100 01 00	<u> </u>	s: Full Service Partnership with the emphasis on ou	utreach to the	
•	209) 468-3760	Populations ser	ved: Older Adult		
Address: 1212 N (City: Stockton, CA					
Type of Program:					
	• • •				
Life Skills (G.O.A Service Partners	· ·	liviedication Suppo	ort; Crisis Intervention		
	Gaining Older Adult		ption: Case Management/ Brokerage; Mental Hea	alth Services;	
Resendez-Rodri		1326542879	Associate Professional Clinical Counselor	14224	Υ
Regalado	Berenice	1376027656	Associate Marriage and Family Therapist	135946	Υ
Garcia	Julio	1679961106	Licensed Marriage and Family Therapist	108163	Υ
Carrasco	Rocio	1841720349	Associate Clinical Social Worker	78314	Υ
Last Name	First Name	NPI	Type of License	License #	СС
		website: https://w	ww.sjcbhs.org/index.aspx		
Non-English Lang	uages: Spanish	Office Hours: Mo	onday - Friday 8:00 am- 5:00 pm		
<u>۵ ځ</u>		address the need	ls of Mentally III Offenders.		
	,		s: Provides comprehensive psychiatric and integrat	ive services to	
Phone Number:(2)		Populations ser	ved: Adult		
City: Stockton, CA					
Address : 1212 N		Integration Cupps	ort, Chair morvention		
Type of Program:	Forensic Court Full		ption: Case Management/ Brokerage; Mental Hea ort; Crisis Intervention	aith Services;	
		1538584859	Licensed Psychaitric Technician	37819	Υ
Wright-Freeman	Angela	1083002992	Registered Nurse	701021	Υ
Winck Wright-Freemar	Gena	1578928974	Associate Clinical Social Worker	120885	Υ
	Taffie	1134570542	Licensed Psychiatric Technician	32090	Υ

Non-English Languages:		Office Hours: Monday - Friday 8:00 am- 5:00 pm				
		website: https://w	/ww.sjcbhs.org/adult.aspx			
Last Name	First Name	NPI	Type of License	License #	CC	
Jackson	Sasha	1295181295	Licensed Clinical Social Worker	96641	Υ	
Murray	Karen	1346735917	Associate Marriage and Family Therpist	138441	Υ	
Washington	Lorraine	1639722820	Associate Marriage and Family Therpist	127280	Υ	
#39AN Type of Program: MH Address: 1212 N. California Street City: Stockton, CA 95202 Phone Number: (209) 468-8880		Coordination (IC	ption: Case Management/ Brokerage including Inte C); Mental Health Services including Intensive Hon ion Support; Crisis Intervention		es	
۵ ٤ .	(209) 468-8880 nguages:Spanish,	opportunities to s Office Hours: M	s: MHSA innovation component providing learning specialized cohorts. onday-Friday 8:00 am- 5:00 pm	community		
Cambodian, Viet	tnamese	website: https://w	/ww.sjcbhs.org/index.aspx			
Last Name	First Name	NPI	Type of License	License #	CC	
Brown	Monique	1962641050	Licensed Marriage and Family Therapist	46467	Υ	
Galvan	Abraham	1386349165	Associate Professional Clinical Counselor	17103		
Johnson Program Name Service Partner	Elizabeth : La Familia Clinic Fu	1730919010 II Program Descri Coordination (IC	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Intensive Hon	149281 ensive Care	es	
Galvan Johnson Program Name Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C	Elizabeth : La Familia Clinic Fu rship (MHSA) n: MH J. California St.	1730919010 II Program Descri Coordination (IC	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Inte	149281 ensive Care	es	
Johnson Program Name: Service Partner #9092 Type of Program Address: 1212 N	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202	1730919010 II Program Descri Coordination (ICI (IHBS); Medicati	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Intensive Hon	149281 ensive Care ne Based Service	es	
Program Name Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Inte C); Mental Health Services including Intensive Hon ion Support; Crisis Intervention	149281 ensive Care ne Based Service s. dication support,	es	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number:	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie individual and gropersons Office Hours: M	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: C); Mental Health Services including Intensive Honion Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spanonday - Friday 8:00 am- 5:00 pm	149281 ensive Care ne Based Service s. dication support,	es	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number:	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie individual and gropersons Office Hours: M	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Inter C); Mental Health Services including Intensive Hone ion Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, med oup therapy with a special emphasis on serving Spa	149281 ensive Care ne Based Service s. dication support,	es	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number:	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie individual and gropersons Office Hours: M	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Inter C); Mental Health Services including Intensive Honion Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spannay - Friday 8:00 am- 5:00 pm vww.sjcbhs.org/adult.aspx Type of License	149281 ensive Care ne Based Service s. dication support,		
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: \(\text{\text{L}} \) Non-English Lan Last Name	Elizabeth : La Familia Clinic Furship (MHSA) n: MH I. California St. CA 95202 (209) 468-2335	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie individual and gropersons Office Hours: M website: https://w	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Inter C); Mental Health Services including Intensive Honion Support; Crisis Intervention rved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, meaning therapy with a special emphasis on serving Spanning Spannin	149281 ensive Care ne Based Service s. dication support, anish-speaking	es CC Y	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Non-English Lan Last Name Amador Cruz	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335 nguages: Spanish First Name	1730919010 II Program Descri Coordination (ICo (IHBS); Medicati Populations ser Cultural Abilitie individual and gropersons Office Hours: M website: https://w NPI 1891127403 1104375724	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Honsion Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, meaning therapy with a special emphasis on serving Spannonday - Friday 8:00 am- 5:00 pm vww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Registered Nurse	149281 ensive Care ne Based Service dication support, anish-speaking License # 102725 723203	CC Y Y	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Non-English Lan Last Name Amador Cruz	Elizabeth : La Familia Clinic Furship (MHSA) n: MH I. California St. CA 95202 (209) 468-2335 Inguages: Spanish First Name Keith	Populations ser Cultural Abilitie individual and grepersons Office Hours: M website: https://w NPI 1891127403 1104375724 1194799395	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Hondon Support; Crisis Intervention rved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, meaning therapy with a special emphasis on serving Spanning Spa	149281 ensive Care ne Based Service s. dication support, anish-speaking License # 102725 723203 A93060	CC Y Y	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Non-English Lan Last Name Amador Cruz Fernandez Flores	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335 riguages: Spanish First Name Keith Gloria Jane Henry	Populations ser Cultural Abilitie individual and grepersons Office Hours: M website: https://w NPI 1891127403 1104375724 1194799395 1992038657	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Honoron Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spannonday - Friday 8:00 am- 5:00 pm vww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Registered Nurse Physician Associate Marriage and Family Therapist	149281 ensive Care ne Based Service dication support, anish-speaking License # 102725 723203 A93060 123887	ССС У У У	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Non-English Lan Last Name Amador Cruz Fernandez Flores	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335 aguages: Spanish First Name Keith Gloria Jane	Populations ser Cultural Abilitie individual and grepersons Office Hours: M website: https://w NPI 1891127403 1104375724 1194799395	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Honson Support; Crisis Intervention rved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spannonday - Friday 8:00 am- 5:00 pm rww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Registered Nurse Physician	149281 ensive Care ne Based Service s. dication support, anish-speaking License # 102725 723203 A93060	CC Y Y	
Program Name. Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Abor-English Lan Last Name Amador Cruz Fernandez	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335 riguages: Spanish First Name Keith Gloria Jane Henry	Populations ser Cultural Abilitie individual and grepersons Office Hours: M website: https://w NPI 1891127403 1104375724 1194799395 1992038657	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Honoron Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spannonday - Friday 8:00 am- 5:00 pm vww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Registered Nurse Physician Associate Marriage and Family Therapist	149281 ensive Care ne Based Service dication support, anish-speaking License # 102725 723203 A93060 123887	СС	
Program Name: Service Partner #9092 Type of Program Address: 1212 N City: Stockton, C Phone Number: Non-English Lan Last Name Amador Cruz Fernandez Flores Hollowell	Elizabeth : La Familia Clinic Furship (MHSA) n: MH J. California St. CA 95202 (209) 468-2335 Inguages: Spanish First Name Keith Gloria Jane Henry Shirley	Program Descri Coordination (ICG (IHBS); Medication Populations ser Cultural Abilities individual and gropersons Office Hours: M website: https://w NPI 1891127403 1104375724 1194799395 1992038657 1124143474	Associate Marriage and Family Therapist ption: Case Management/ Brokerage including Interception: Mental Health Services including Intensive Honion Support; Crisis Intervention ved: Adult - Focus on Latino outreach and access s: Psychiatric assessment, case management, medoup therapy with a special emphasis on serving Spannonday - Friday 8:00 am- 5:00 pm vww.sjcbhs.org/adult.aspx Type of License Licensed Marriage and Family Therapist Registered Nurse Physician Associate Marriage and Family Therapist Registered Nurse Registered Nurse	License # 102725 723203 A93060 123887 352081	ССС	

1	: Mary Graham	Program Descri	ption: Case Management/ Brokerage including Int	ensive Care	
Children's Shel	ter #9008	Coordination (ICC	C); Mental Health Services including Intensive Hon	ne Based Service	es
Type of Program	n: MH	(IHBS); Medicati	on Support; Crisis Intervention		
	Mary Graham Lane				
City: Stockton, C	•				
Phone Number:		Populations ser	ved: Children and Youth		
		Cultural Abilities	s: Provides outpatient mental health services to res	sidents of Mary	
<u>^</u> &		Graham Children	's Shelter.		
Non-English Lan	iguages:	Office Hours: 24	4 HOURS Monday through Friday 8-5 pm		
F I		website: https://m	narygrahamfoundation.org/		
Last Name	First Name	NPI	Type of License	License #	CC
Agans	Adrianna	1851831242	Licensed Marriage and Family Therapist	131299	Υ
Kumar	Gaurav	1235513102	Physician	A151187	Υ
Torres	Josephine	1467018044	Licensed Marriage and Family Therapist	144676	Υ
Washington	Kerry	1689391997	Registered Nurse	RN5599310	Υ
Yocham	Amanda	1326103516	Licensed Marriage and Family Therapist	79068	Υ
Yocham Amanda Program Name: MHSA TAY FSP #39B1 Type of Program: MH Address: 1212 N. California City: Stockton, CA 95202 Phone Number:(209) 468-2335		(IHBS); Medicati	on Support; Crisis Intervention		
Address: 1212 N City: Stockton, C	I. California CA 95202 (209) 468-2335	Populations ser Cultural Abilities Office Hours: M	ved: Adults s: Full service partnership providing outpatient men onday - Friday 8:00 am- 5:00 pm	ntal health service	es
Address: 1212 N City: Stockton, C Phone Number:(I. California CA 95202 (209) 468-2335 Iguages:	Populations ser Cultural Abilities Office Hours: M website: https://w	ved: Adults s: Full service partnership providing outpatient men londay - Friday 8:00 am- 5:00 pm ww.sjcbhs.org/index.aspx		
Address: 1212 N City: Stockton, C Phone Number:(I. California CA 95202 (209) 468-2335 (guages: First Name	Populations ser Cultural Abilities Office Hours: M website: https://w	ved: Adults s: Full service partnership providing outpatient men onday - Friday 8:00 am- 5:00 pm ww.sjcbhs.org/index.aspx Type of License	License #	СС
Address: 1212 N City: Stockton, C Phone Number:(Non-English Lan Last Name Ekpokai	I. California CA 95202 (209) 468-2335 Iguages: First Name	Populations ser Cultural Abilities Office Hours: M website: https://w NPI 1518603927	ved: Adults s: Full service partnership providing outpatient men onday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker	License # 94485	CC Y
Address: 1212 N City: Stockton, C Phone Number:(Non-English Lan Last Name Ekpokai Schmidt	I. California CA 95202 (209) 468-2335 (guages: First Name Tsola Katarzyna	Populations service Cultural Abilities Office Hours: M website: https://w NPI 1518603927 1285290346	ved: Adults s: Full service partnership providing outpatient men onday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist	License # 94485 130542	CC Y Y
Address: 1212 N City: Stockton, C Phone Number:(Non-English Lan Last Name Ekpokai Schmidt Williams	I. California CA 95202 (209) 468-2335 (guages: First Name Tsola Katarzyna Showvon	Populations servicular Abilities Office Hours: Market Medical	ved: Adults s: Full service partnership providing outpatient mentonday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Professional Clinical Counselor	License # 94485 130542 14222	CC Y
Address: 1212 N City: Stockton, C Phone Number:(\(\triangle \triangle \) Non-English Lan Last Name Ekpokai Schmidt Williams Program Name: Type of Program Address: 1212 N	I. California CA 95202 (209) 468-2335 (guages: First Name Tsola Katarzyna Showvon COlder Adult Services MH I California Street	Populations ser Cultural Abilities Office Hours: M website: https://w NPI 1518603927 1285290346 1689133464 Program Descri	ved: Adults s: Full service partnership providing outpatient men onday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist	License # 94485 130542 14222	CC Y Y
Address: 1212 N City: Stockton, C Phone Number:(Non-English Lan Last Name Ekpokai Schmidt Williams Program Name Type of Program Address: 1212 N City: Stockton, C	I. California CA 95202 (209) 468-2335 (guages: First Name Tsola Katarzyna Showvon COlder Adult Services CA 95202	Populations servicular Abilities Office Hours: Machine Medication Support	ved: Adults s: Full service partnership providing outpatient mentonday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Professional Clinical Counselor ption: Case Management/ Brokerage; Mental Heaport; Crisis Intervention	License # 94485 130542 14222	CC Y Y
Address: 1212 N City: Stockton, C Phone Number:(\(\triangle \triangle \) Non-English Lan Last Name Ekpokai Schmidt Williams Program Name: Type of Program Address: 1212 N	I. California CA 95202 (209) 468-2335 (guages: First Name Tsola Katarzyna Showvon COlder Adult Services CA 95202	Populations servicular Abilities Office Hours: Management Medication Support Populations servicular Abilities Program Descripment Medication Support Populations servicular Abilities Provided by a musupport, group, in	ved: Adults s: Full service partnership providing outpatient mentonday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Professional Clinical Counselor ption: Case Management/ Brokerage; Mental Headort; Crisis Intervention ved: Older Adult s: Comprehensive Behavioral Health Services for output of the control of the con	License # 94485 130542 14222 14222 1416 Services;	CC Y Y Y
Address: 1212 N City: Stockton, C Phone Number:(\(\triangle \) Non-English Lan Last Name Ekpokai Schmidt Williams Program Name Type of Program Address: 1212 N City: Stockton, C Phone Number: \(\triangle \) Non-English Lan	I. California CA 95202 (209) 468-2335 Iguages: First Name Tsola Katarzyna Showvon COlder Adult Services CA 95202 (209) 468-3760 Iguages: Spanish,	Populations service Cultural Abilities Office Hours: Machine Medication Support Populations service Cultural Abilities provided by a musupport, group, in Office Hours: Machine Medication Support, group, in	ved: Adults s: Full service partnership providing outpatient mentonday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Professional Clinical Counselor ption: Case Management/ Brokerage; Mental Heatort; Crisis Intervention ved: Older Adult s: Comprehensive Behavioral Health Services for output of the county of the co	License # 94485 130542 14222 14222 1416 Services;	CC Y Y Y
Address: 1212 N City: Stockton, C Phone Number:(Non-English Lan Last Name Ekpokai Schmidt Williams Program Name Type of Program Address: 1212 N City: Stockton, C Phone Number:	I. California CA 95202 (209) 468-2335 Iguages: First Name Tsola Katarzyna Showvon COlder Adult Services CA 95202 (209) 468-3760 Iguages: Spanish,	Populations service Cultural Abilities Office Hours: Machine Medication Support Populations service Cultural Abilities provided by a musupport, group, in Office Hours: Machine Medication Support, group, in	ved: Adults s: Full service partnership providing outpatient mentonday - Friday 8:00 am- 5:00 pm www.sjcbhs.org/index.aspx Type of License Associate Clinical Social Worker Associate Marriage and Family Therapist Associate Professional Clinical Counselor ption: Case Management/ Brokerage; Mental Headort; Crisis Intervention ved: Older Adult s: Comprehensive Behavioral Health Services for output of the control of the con	License # 94485 130542 14222 14222 1416 Services;	CC Y Y Y

Last Name	First Name	NPI	Type of License	License #	СС
		website: https://wv	vw.sjcbhs.org/index.aspx		
			Saturday - Sunday 10:00 am - 7:00 pm		
Non-English Langu	lages: Spanish	Office Hours:	Monday - Friday 8:00 am - 8:00 pm		
△ Č .		Peterson Hall.			
•			: Provides outpatient mental health services to you	uth detained at	
Phone Number (20	9)468-4240	· ·	ed: Children and Youth		
City: French Camp					
Address: 535 W M		(ii ibo), iviculcatio	an oupport, Onoio intorvontion		
Type of Program: N		· ·	on Support; Crisis Intervention	IC DOSEC OCIVIC	JG3
_	eterson Hall #9009		tion: Case Management/ Brokerage including Intelli); Mental Health Services including Intensive Hon		291
Rivas-Olivares	Yulisa	1801445085	Associate Clinical Social Worker	96813	Y
Pinon	Karen	1518572320	Associate Professional Clinical Counselor	10658	Y
Payne	Sheilena	1336437656	Licensed Marriage and Family Therapist	120167	Y
Lopez	Alexis	1932767225	Licensed Marriage and Family Therapist	141235	Y
Herron	Rita	1659629285	Licensed Marriage and Family Therapist	117262	Y
Gutierrez	Antonio	1023473469	Licensed Clinical Social Worker	71535	Y
Gomez-Boulware		1679098776	Licensed Marriage and Family Therapist	139138	Υ
Del Toro	Jose	1578058681	Licensed Marriage and Family Therapist	93646	Y
Cupit	Christy	1386286383	Associate Marriage and Family Therapist	120662	Y
Jensen	Renessa	1376664862	Licensed Marriage and Family Therapist	81528	Y
Castaneda-		1076661060		0.4.500	
Barajas	Lauren	1154893683	Licensed Clinical Social Worker	101688	Υ
Last Name	First Name	NPI	Type of License	License #	CC
			ww.sjcbhs.org/index.aspx	-	
Non-English Langu	ages: Spanish	Office Hours:	Monday - Friday 8:00 am - 5:00 pm		
△ & .			dependent SJC children		
_		Cultural Abilities	: Provides in-home and in-community outpatient n	nental health se	rvices
Phone Number: (20	09) 468-1547	Population Serve	ed: Children and Youth		
City: Stockton, CA					
Address: 620 N. A					
Type of Program: N	ИΗ	(IHBS); Medication	on Support; Crisis Intervention		
Wellbeing #9020	-	Coordination (ICC); Mental Health Services including Intensive Hon	ne Based Servio	ces
Program Name: P	athways to	Program Descrip	tion:Case Management/ Brokerage including Inte	nsive Care	
Vales	Kevin	1952525909	Licensed Marriage and Family Therapist	79770	Υ
Tracy	Kelly	1508510033	Associate Clinical Social Worker	117056	Υ
Stephens	Sonya	1558020123	Associate Professional Clinical Counselor	11864	Υ
Resendez	Cynthia	1780877845	Physician	A84098	Υ
House	Tracy	1720503550	Licensed Psychiatric Technician	32050	Υ
Chukwuka	Ogiram	1063662781	Licensed Clinical Social Worker	81785	Υ

Program Name	Program Name: Psychiatric Health Program Name: Program Nam		ption: Non-Hospital PHF		
Zodikoff	Katelyn	1629418678	Licensed Marriage and Family Therapist	138440	Υ
Yocham	Amanda	1326103516	Licensed Marriage and Family Therapist	79068	Υ
Shabneet	Hira Brar	1851598452	Physician	A112447	Υ
Pablico	Shiella	1588036321	Licensed Psychiatric Technician	37620	Υ
Mullen	Alvin Jay	1336808971	Psychiatric Technican	41866	Υ
DeLaTorre	Sandra	1679976229	Associate Clinical Social Worker	1122335	Υ
Agans	Adrianna	1851831242	Licensed Marriage and Family Therapist	131299	Υ

Facility (PHF) #3976

Type of Program: MH

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

Phone Number: (209) 468-8686

ે દ્

Non-English Languages:Spanish

Cambodian, Vietnamese

Populations served: Adult

Cultural Abilities: Inpatient psychiatric hospitalization services

Office Hours: OPEN 24 HOURS

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

		website: https://w	website: https://www.sjcbhs.org/psychiatric_health_facility.aspx					
Last Name	First Name	NPI	Type of License	License #	СС			
Abundez	Jesse	1841413036	Licensed Psychiatric Technician	29162	Υ			
Bareng	Jeff	1043753478	Licensed Psychiatric Technician	40284	Υ			
Bokelman	Roy	111404003	Licensed Psychiatric Technician	32628	Υ			
Brown	Brandi	1316060023	Registered Nurse	713008	Υ			
Cabrera	Gilbert	1679693766	Registered Nurse	565185	Υ			
Camello	Bena	1053581116	Licensed Clincial Social Worker	65302	Υ			
Clutario	Dindo	1164664512	Licensed Psychiatric Technician	34295	Υ			
Daniel	Steven	1184366528	Licensed Psychiatric Technician	41990	Υ			
Dapon	Jeanette	1780152918	Registered Nurse	824521	Υ			
DeJesus	Carolyn	1861650228	Licensed Psychiatric Technician	34221	Υ			
Gill	Paramijit	1073629218	Physician	A49224	Υ			
Graff	Robert	1366560112	Physician	G70479	Υ			
Harbin	Toni	1639475049	Licensed Psychiatric Technician	28726	Υ			
Hardy	Denise	1912202813	Licensed Psychiatric Technician	33714	Υ			
Holmes	Sherronya	1205214228	Licensed Psychiatric Technician	37605	Υ			
Kaur	Narinder	1063006294	Licensed Psychiatric Technician	41886	Υ			
Kottke	Marline	1891223111	Licensed Vocational Nurse	198957	Υ			
Laizer	Gloria	1255706479	Registered Nurse	764452	Υ			
Lambert	Rekha	1164647525	Licensed Marriage and Family Therapist	103862	Υ			
Limas	Stephanie	1053433748	Licensed Marriage and Family Therapist	99397	Υ			
Little	Christy	1497978795	Licensed Psychiatric Technician	28731	Υ			
Lo	Muacong	1689300857	Licensed Psychiatric Technician	42402	Υ			
Martin	Kaitlyn	1548959802	Licensed Psychiatric Technician	42399	Υ			
Mendoza	Michelle	1477951812	Registered Nurse	797022	Υ			

Michael	Kimberley	1538831151	Licensed Psychiatric Technician	29086	Υ	
Mocko	James	1558726224	Licensed Psychiatric Technician	38249	Y	
Myotte	Wendy	1265554638	Licensed Marriage and Family Therapist	84045	Y	
Ota	Robert	1578786554	Licensed Psychiatric Technician	33792	Y	
Pinano	Paolo	1245352616	Licensed Psychiatric Technician	33732	Y	
Rios	Teri	1942323829	Licensed Psychiatric Technician	29213	Y	
Ruiz	Ronald	1700907094	Licensed Psychiatric Technician	27494	Y	
Sahota	Mandeep	1609536994	Registered Nurse	831415	Y	
Seraypheap	Arunny	1013037274	Registered Nurse	547944	Y	
Sesante	Maria	1851515720	Licensed Psychiatric Technician	30936	Y	
Silver	Hilary	1720201221	Physician	C33442	Y	
	Sokchear	1316187362		95268104	Y	
Sous-Figueroa	Frankie	1073631727	Registered Nurse	95208104	Y	
Tuning	Charles	1700944121	Registered Nurse	G185940	Y	
Tupper			Physician		Y	
Varquez	Sharon	1366682387	Licensed Psychiatric Technician	34435	.	
Villasenor	Kendra	1447518204	Licensed Psychiatric Technician	36449	Y	
Winck Program Name: I	Angela	1083002992	Registered Nurse tion: Outpatient case management, care coordinates	701021	Y	
City: Stockton, CA 95202 Phone Number: (209) 468-9373		Populations served: Adult Cultural Abilities: Adults with history of and risk of further Justice Involvement Office Hours: Monday - Friday 8:00 am - 5:00 pm				
			•			
Last Name	First Name		w.sjcbhs.org/index.aspx Type of License	License #	СС	
Last Name Bautista		website: https://ww	vw.sjcbhs.org/index.aspx Type of License		CC Y	
Bautista	First Name Daniel	website: https://ww	Type of License Associate Marriage and Family Therapist	License # 112805 46467		
Bautista Brown	First Name Daniel Monique	website: https://ww NPI 1407490733 1962641050	w.sjcbhs.org/index.aspx Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist	112805	Υ	
Bautista Brown Castro	First Name Daniel Monique Gerardo	website: https://ww NPI 1407490733 1962641050 1780123737	W.sjcbhs.org/index.aspx Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker	112805 46467 117866	Y	
Bautista Brown Castro Program Name: S	First Name Daniel Monique Gerardo San Joaquin County	website: https://ww NPI 1407490733 1962641050 1780123737 Program Description	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intervalses	112805 46467 117866 ensive Care	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924	website: https://ww NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC)	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intel); Mental Health Services including Intensive Hon	112805 46467 117866 ensive Care	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod Type of Program:	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH	website: https://www.NPI 1407490733 1962641050 1780123737 Program Description (ICC) (IHBS); Medication	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intervalses	112805 46467 117866 ensive Care	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod Type of Program: Address: 1209 W.	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites	website: https://www.NPI 1407490733 1962641050 1780123737 Program Description (ICC) (IHBS); Medication	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intel); Mental Health Services including Intensive Hon	112805 46467 117866 ensive Care	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites	website: https://www.NPI 1407490733 1962641050 1780123737 Program Description (ICC) (IHBS); Medications	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Inte); Mental Health Services including Intensive Hon In Support; Crisis Intervention	112805 46467 117866 ensive Care	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod Type of Program: Address: 1209 W.	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intel); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth	112805 46467 117866 ensive Care ne Based Service	Y Y Y	
Bautista Brown Castro Program Name: S MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications Populations serve Cultural Abilities:	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Inte); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth Comprehensive mental health services for adults	112805 46467 117866 ensive Care ne Based Service	Y Y Y	
Bautista Brown Castro Program Name: 3 MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952 Phone Number:(2	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications Populations serve Cultural Abilities: youth, and their fail	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intel); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth Comprehensive mental health services for adults milies living in North County area. Services including	112805 46467 117866 ensive Care ne Based Service s (18-60), childre e psychiatric	Y Y Y ces	
Bautista Brown Castro Program Name: \$ MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952 Phone Number:(2	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites 240 09) 331-2070	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications Populations serve Cultural Abilities: youth, and their fail assessment, medical contents of the contents of	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Inte); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth Comprehensive mental health services for adults milies living in North County area. Services includ cation support, group and individual therapy, and	112805 46467 117866 ensive Care ne Based Service s (18-60), childre e psychiatric	Y Y Y ces	
Bautista Brown Castro Program Name: \$ MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952 Phone Number:(2	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites 240 09) 331-2070	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications Populations serve Cultural Abilities: youth, and their fail assessment, medical contents of the contents of	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Intel); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth Comprehensive mental health services for adults milies living in North County area. Services including	112805 46467 117866 ensive Care ne Based Service s (18-60), childre e psychiatric	Y Y Y ces	
Bautista Brown Castro Program Name: 3 MH Services Lod Type of Program: Address: 1209 W. City: Lodi, CA 952 Phone Number:(2	First Name Daniel Monique Gerardo San Joaquin County Ii Clinic #3924 MH Tokay Street, Suites 240 09) 331-2070	website: https://www.NPI 1407490733 1962641050 1780123737 Program Descript Coordination (ICC) (IHBS); Medications Populations serve Cultural Abilities: youth, and their fair assessment, medical Office Hours: More	Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Associate Clinical Social Worker tion: Case Management/ Brokerage including Inte); Mental Health Services including Intensive Hon In Support; Crisis Intervention ed: Adult, Children, and Youth Comprehensive mental health services for adults milies living in North County area. Services includ cation support, group and individual therapy, and	112805 46467 117866 ensive Care ne Based Service s (18-60), childre e psychiatric	Y Y Y	

Dua arrama Marra	Can Jacquin County	Drawram Dagari	Draway Description: Cose Management/ Protegram including Intensive Core				
Tamayo	Donelle	1073871216	Registered Nurse	551864	Υ		
Soares	Ana	1922191410	Physician	A68523	Υ		
Saluja	Amandeep	1588894778	Physician	C175781	Υ		
Romero	Karla	1083133276	Associate Marriage and Family Therapist	100573	Υ		
Rizvi	Saba	1619190501	Physician	A95786	Υ		
Ramiscal	Rio	1851046700	Licensed Psychiatric Technician	42121	N		
Ramires	Azucena	1316497274	Associate Marriage and Family Therapist	130891	Υ		
Phillips	Victoria	1871110437	Associate Clinical Social Worker	92751	Υ		
Padilla	Cassandra	1477137289	Registered Nurse	95137004	Υ		
Kumar	Gaurav	1235513102	Physician	A151187	Υ		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ		
Hill	Patricia	1902926231	Licensed Marriage and Family Therapist	23764	Υ		
Dhillon	Gipanjot	1013446046	Physician	A21935	Υ		
Cusumano	Katherine	1659988822	Associate Professional Clinical Counselor	8125	Υ		
Chavez	April	1760959670	Licensed Marriage and Family Therapist	113250	Υ		
Allanki	Sailaja	1306897723	Physician	138838	Υ		
Alcaraz Tapia	Maria Marlen	1942470299	Licensed Marriage and Family Therapist	93646	Υ		
Alban	Benjamin	1932227295	Licensed Clinical Social Worker	26094	Υ		
Abdullahi	Krissie	1407307762	Associate Marriage and Family Therapist	125000	Υ		

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

Type of Program: MH

Address: 220 W. Eleventh Street

City: Tracy, CA 95376

△ 5

Phone Number: (209) 831-5941

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

Populations served: Adult

Cultural Abilities: Comprehensive mental health services for adults (18-60) living in South County area. Services include psychiatric assessment, medication support, group

and individual therapy, and case management.

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

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

		website. https://www.sjebris.org/addit.dspx					
Last Name	First Name	NPI	Type of License	License #	CC		
Arcega	Christina	1609219450	Licensed Marriage and Family Therapist	137032	N		
Dwyer	Danyelle	1124672266	Associate Clinical Social Worker	115736	Υ		
Everson	Maja	1811975139	Physician	172144	Υ		
Gutoman	Jon Christopher	1578814042	Licensed Marriage and Family Therapist	130945	Υ		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ		
Jackson	Sasha	1295181295	Licensed Clinical Social Worker	96641	Υ		
Keys	Sheryl	1942664875	Psychiatric Technican	38333	Υ		
Pasa	Angelo	1689874125	Registered Nurse	691250	Υ		
Stokes	Vicki	1164061024	Licensed Clinical Social Worker	117183	Υ		

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

Type of Program: MH

Address: 4422 N. Pershing Ave, City: Stockton, CA 95207

Phone Number: (209) 953-8843

<u>ا</u>لم

Non-English Languages: Cambodian,

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

Populations served: Adult Focus on outreach and access for the Southeast Asian populations

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

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

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

Last Name	First Name	NPI	Type of License	License #	CC		
Chukwuka	Ogiram	1063662781	Licensed Clinical Social Worker	81785	Υ		
Hollowell	Shirley	1124143474	Registered Nurse	352081	Υ		
Nguyen	Quynh-Chi	1417371014	Registered Nurse	845080	Υ		
Smith	Pamela	1902889694	Physician	G84663	Υ		
Thao	Seelina	1215093653	Associate Marriage and Family Therapist		Υ		
Xiong	Maly	1932218849	Licensed Marriage and Family Therapist	86055	Υ		

Program Name: Southeast Asian Recovery Services (SEARS) for the Southeast Asian population-Full Service Partnership (MHSA) #9094

Type of Program: MH

Address:4422 N. Pershing Avenue,

Non-English Languages: Cambodian,

City: Stockton, CA 95207

Phone Number: (209) 953-8843

<u>د</u> کے ۵

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

Populations served: Adult Focus on outreach and access for the Southeast Asian population

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

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

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

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

Type of Program: MH Address: 6 S. El Dorado Street, Suite City: Stockton, CA 95202 Phone Number: (209) 478-9862 Populations served: Children and Youth Cultural Abilities: Provides Therapeutic Behavioral Services (TBS) and crisis stabilization services as an alternative to psychiatric hospitalization. Office Hours: Monday - Friday, 8:00 am - 5:00 pm Website: https://www.aspiranet.org Last Name First Name NPI Type of License License # CC Benitez Felecia 1780389015 Associate Clinical Social Worker 113910 Y Carpenter Brandon 1659148963 Associate Marriage and Family Therapist 137674 Y Garcia Isamar 1093461576 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 127517 Y Roma Mame: Casa Pacifica 1649935743 Associate Clinical Social Worker 123850 Y Program Name: Casa Pacifica Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Deputations Services (TBS); Crisis Intervention Populations Services (TBS); Crisis Intervention Cultural Abilities: Provides outpatient mental health services CC OUT OF COUNTY PROVIDER Program Description: Mental Health Services Intensive Home Based Services # CC OUT OF COUNTY PROVIDER Program Description: Mental Health Services Intensive Home Based Services CC Program Name: CBIS (University of Program Description: Mental Health Services Intensive Home Based Services CC	CONTRACT ORGA	NIZATIONAL PROV	/IDERS				
Phone Number: (209) 478-9862 Populations served: Children and Youth	#39AR Type of Program: MH Address: 6 S. El Dorado Street, Suite		(ICC); Mental Health Services including Intensive Home Based Services (IHBS);				
Cultural Abilities: Provides Therapeutic Behavioral Services (TBS) and crisis stabilization services as an alternative to psychiatric hospitalization. Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https//www.aspiranet.org Last Name First Name NPI Type of License License # CC Benitez Felecia 1780389015 Associate Clinical Social Worker 113910 Y Carpenter Brandon 1659148963 Associate Professional Clinical Counselor 14610 Y Garcia Isamar 1093461576 Associate Marriage and Family Therapist 137674 Y Juarez Lucerito 1417436155 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 142415 Y Singh Aneesha 1649935743 Associate Marriage and Family Therapist 142415 Y Program Name: Casa Pacifica Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); #39AB Mental Health Services including Intensive Home Based Services (IHBS); Therapeutus Behavioral Services (TBS); Crisis Intervention Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday, 8:00 am - 5:00 pm Website: https://www.asapiranet.org Cultural Abilities: Provides outpatient mental health services CC OUT OF COUNTY PROVIDER Type of License CC OUT OF COUNTY PROVIDER Type of License CC OUT OF COUNTY PROVIDER Program Mame: CBIS (University of the Pacific) #39A1 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Populations served: Adult Cultural Abilities: Behavioral Intervention Services Counters CC Cultural Abilities: Behavioral Intervention Services CIticense CC Cultural Abilities: Behavioral Intervention Services CC Cul			Populations serve	ed: Children and Youth			
Stabilization services as an alternative to psychiatric hospitalization.	,	,			and crisis		
Non-English Languages: website: https://www.aspiranet.org	o Ġ .		stabilization service	es as an alternative to psychiatric hospitalization.			
License First Name First Name River Name River Name Renitez Felecia 1780389015 Associate Clinical Social Worker 113910 Y	Non-English Langu	ages:					
Benitez Felecia 1780389015 Associate Clinical Social Worker 113910 Y Carpenter Brandon 1659148963 Associate Professional Clinical Counselor 14610 Y Garcia Isamar 1093461576 Associate Marriage and Family Therapist 137674 Y Juarez Lucerito 1417436155 Associate Marriage and Family Therapist 127517 Y Singh Aneesha 1649935743 Associate Marriage and Family Therapist 142415 Y Singh Aneesha 1649935743 Associate Marriage and Family Therapist 142415 Y Singh Aneesha 1649935743 Associate Marriage and Family Therapist 142415 Y Program Name: Casa Pacifica #39AB Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https://www.casapacifica.org/ Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address-405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address-405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Associate Marriage and Family Therapist 127517 Y Cultural Abilities: Provides outpatient mental health services Intensive Home Based Services Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address-405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name First Name NPI Type of License License # CC			website: https://www	w.aspiranet.org			
Carpenter	Last Name	First Name	NPI	Type of License	License #	CC	
Garcia Isamar 1093461576 Associate Marriage and Family Therapist 127674 Y Juarez Lucerito 1417436155 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 127517 Y Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 142415 Y Singh Aneesha 1649935743 Associate Clinical Social Worker 123850 Y Program Name: Casa Pacifica #39AB Type of Program: MH Address: 1722 S. Lewis Road City: Camarrillo, CA 93012 Phone Number: (805) 981-1422 Ababasia Associate Marriage and Family Therapist 142415 Y Asso	Benitez	Felecia		Associate Clinical Social Worker			
Juarez Lucerito 1417436155 Associate Marriage and Family Therapist 127517 Y	Carpenter	Brandon	1659148963	Associate Professional Clinical Counselor	14610	Υ	
Roma Sheen Cachero 1962008565 Associate Marriage and Family Therapist 142415 Y Singh Aneesha 1649935743 Associate Clinical Social Worker 123850 Y Program Name: Casa Pacifica #39AB Program MH Address: 1722 S. Lewis Road City: Camarrillo, CA 93012 Phone Number: (805) 981-1422 Office Hours: Monday - Friday, 8:00 am - 5:00 pm Website: Intervention Program: MPI Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Office Hours: Monday - Friday 8:00 am - 5:00 pm Website: none Last Name First Name Non-English Languages: Spanish Prist Name Non-English Languages: Calculation Adaptives and License Management Brokerage/Intensive Home Based Services (IBS); Therapeutic Program Language Home Based Services (IBS); Therapeutic Program Description: Case Management Brokerage/Intensive Home Based Services (IBS); Therapeutic Program Description: Cas	Garcia	Isamar	1093461576	Associate Marriage and Family Therapist	137674	Υ	
Singh Aneesha 1649935743 Associate Clinical Social Worker 123850 Y	Juarez	Lucerito	1417436155	Associate Marriage and Family Therapist	127517	Υ	
Program Name: Casa Pacifica #39AB Type of Program: MH Address: 1722 S. Lewis Road City: Camarrillo, CA 93012 Phone Number: (805) 981-1422 Cultural Abilities: Provides outpatient mental health services Non-English Languages: Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https://www.casapacifica.org/ Last Name First Name First Name First Name Frogram Description: Mental Health Services Intervention Program Description: Case Management Brokerage/Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https://www.casapacifica.org/ NPI Type of License License # CC OUT OF COUNTY PROVIDER Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name First Name NPI Type of License License # CC	Roma Sheen	Cachero	1962008565	Associate Marriage and Family Therapist	142415	Υ	
#39AB Type of Program: MH Address: 1722 S. Lewis Road City: Camarrillo, CA 93012 Phone Number: (805) 981-1422 Cultural Abilities: Provides outpatient mental health services Populations served: Children and Youth	Singh	Aneesha	1649935743	Associate Clinical Social Worker	123850	Υ	
Phone Number: (805) 981-1422 Populations served: Children and Youth	Address: 1722 S. L	ewis Road			7′ 1		
Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https://www.casapacifica.org/ Last Name First Name NPI Type of License License # CC OUT OF COUNTY PROVIDER Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address:405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Abilities: Provides outpatient mental health services Program - 5:00 pm Website: none Cultural Abilities: Provides outpatient mental health services University 8:00 am - 5:00 pm Website: none License # CC	-		Populations served: Children and Youth				
Non-English Languages: Office Hours: Monday - Friday, 8:00 am - 5:00 pm website: https://www.casapacifica.org/ NPI Type of License		,	•				
Last Name First Name Firs		ados.		•			
Last Name First Name NPI Type of License License # CC OUT OF COUNTY PROVIDER	Tron-English Langu	ayes.					
OUT OF COUNTY PROVIDER Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name First Name Program Description: Mental Health Services Intensive Home Based Services Mental Health Services Intensive Home Based Services Cellural Abilities: Behavioral Health Services Intensive Home Based Services Cellural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm Website: none	Last Namo	First Namo	•		License #	CC	
Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name Program Description: Mental Health Services Intensive Home Based Services Mental Health Services Intensive Home Based Services Mental Health Services Intensive Home Based Services Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm Website: none License # CC				Type of Electise	1.0000		
Phone Number: (209) 464-5519 Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name First Name NPI Type of License License # CC	Program Name: CBIS (University of the Pacific) #39A1 Type of Program: MH Address:405 E. Pine Street		Program Descript	ion: Mental Health Services Intensive Home Ba	sed Services		
Cultural Abilities: Behavioral Intervention Services Office Hours: Monday - Friday 8:00 am - 5:00 pm website: none Last Name First Name NPI Type of License License CC	•		Populations serve	ed: Adult			
website: none Last Name First Name NPI Type of License License # CC	٥ ٤ .	,					
The traine	Non-English Langua	ages: Spanish		onday - Friday 8:00 am - 5:00 pm			
	Last Name	First Name	NPI	Type of License	License #	CC	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							

Program Name: Charis Youth Center #9057 Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services					es	
Type of Progran	n: MH	,	on Support; Crisis Intervention			
Address : 714 W						
City: Grass Valle						
-	(530) 477-9800	Populations ser	ved: Children and Youth			
△ Ġ .	(333) 117 3333		s: Outpatient Mental Health Services			
Non-English Lar	Juliauez.		Monday - Friday 8:00 am - 5:00 pm			
TVOIT ETIGIISIT EAT	iguages.		/ww.charisyouthcenter.org/			
Last Name	First Name	NPI	Type of License	License #	СС	
OUT OF COUN		1 2 2	Type of License			
Program Name Prevention Cou Type of Progran Address: 540 N. City: Stockton, C	uncil #39AS n: MH . California Street		ption: Case Management/ Brokerage including Int C); Mental Health Services including Intensive Hon tervention		ces	
Phone Number:		Populations ser	ved: Children and Youth			
△ &	` '	Cultural Abilities: Provides outpatient mental health services utilizing strengthening family approach Office Hours: Monday - Friday 8:00 am - 5:00 pm website: www.nochildabuse.org				
Non-English Lar	nguages:					
Last Name	First Name	NPI	Type of License	License #	СС	
Archangel	Ashle	1801216965	Associate Marriage and Family Therapist	106324	Υ	
Beck	Vienna	1396390878	Licensed Marriage and Family Therapist	150502	Υ	
Jacka	Karen	1790908788	Licensed Clinical Social Worker	16470	Υ	
Looney	Taylere	1003553223	Licensed Marriage and Family Therapist	152346	Υ	
Stockton #39B Type of Progran Address: 430 N. City: Stockton, C	n: MH . Pilgrim Street CA 95205	Coordination (ICC	ption: Case Management/ Brokerage including Int C); Mental Health Services including Intensive Homoport; Crisis Intervention		ces	
	(209) 466-0853	Populations ser	ved: Youth and Adolescent			
△ &		Cultural Abilities	s: Short Term Residential Therapeutic Program			
Non-English Lar	nguages:	Office Hours: 24	HOURS			
		Website: https://c	chstockton.org/			
		NPI	Type of License	License #	CC	
Last Name	First Name		Type of Election			
Last Name Lopez	First Name Stephanie	1184385908	Associate Marriage and Family Therapist	138590	Υ	
				138590 148785	Y	
Lopez	Stephanie	1184385908	Associate Marriage and Family Therapist			
Lopez Randolph	Stephanie Jordyn	1184385908 1699462150	Associate Marriage and Family Therapist Associate Marriage and Family Therapist	148785	Υ	

D N 0	M. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	In n		. 0			
_		Program Description: Case Management/ Brokerage including Intensive Care					
		Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Med Support; Crisis Intervention					
Type of Program: MH		(Inbo), Wed Supp	ort, Crisis intervention				
Trype of Program. I	Address 1227 E Lindsay St						
Address 1227 F Li							
City: Stockton, CA	·						
	Phone Number:(209) 466-0853		ed: Youth and Adolecent				
,	70, 100 0000						
വ ക്ര Non-English Langu	iados.	Office Hours: 24	Short Term Residential Therapeutic Program				
Non-English Lange	iages.	website:https://chs					
Lost Nome	First Name	NPI		License #	СС		
Last Name		1184385908	Type of License				
Lopez	Stephanie	1699462150	Associate Marriage and Family Therapist	138590	Y		
Randolph Reinhardt	Jordyn	1689296311	Associate Marriage and Family Therapist Licensed Clinical Social Worker	148785 120751	-		
	Janae				Y		
Ruggles	James	2084P0804X	Physician	C35361	Y		
Thomas	Tiffany Community Re-Entry	1376232850	Community Health Worker tion: Case Management/ Brokerage; Mental Hea	NA	Υ		
City: Stockton, CA Phone Number: (2			Populations served: Adult Cultural Abilities: Provides independent living skills training and rehabilitation services				
Non-English Langu	uages: Spanish		nday - Friday 8:00 am - 5:00 pm				
l and angles and	g	website: none	, ,				
Last Name	First Name	NPI	Type of License	License #	CC		
NON LICENSED S			† <i>''</i>				
Program Name: E #39CP Type of Program: I Address: 525 W. K City: Lodi, CA 9524	ettleman Lane	Program Description: Case Management/Brokerage inlcuding Intensive Care Coordinatiion (ICC); Mental Health Services including Intensive Home Bases Services (IHBS); Crisis Intervention.					
Phone Number: (2)		Populations serve	ed: Youth & Adolescent				
	00) 000 1000	-		roarom			
			Short Term Residenital Treatment Therapeutic P	ogram			
Non-English Langu	lages:	Office Hours: 24					
	l=• ·	website: www.ea.o		lliconce #			
Last Name	First Name	NPI	Type of License	License #	СС		
1				1			

Program Name: EA Family Services Losh STRTP #39CN			ion: Case Management/Brokerage inlcuding Inte		es
Type of Program: M Address: 601 Palm City: Lodi, CA 9524	Ave.	(IHBS); Crisis Interv	vention.		
Phone Number: (20		Populations serve	ed: Females 6-12		
் ட் Non-English Langu	,	·	Youth, LGBT, CSED, Training encompassing mulds. Hours	tiple ethnicities	and
Last Name	First Name	NPI	Type of License	License #	СС
Baltezore	Erica	1053447854	Licensed Marriage and Family Therapist	96971	Υ
Gonzalez	Rosalba	1548977457	Associate Social Worker	106674	Υ
Lukyanov	Inna	1588073274	Associate Marriage and Family Therapist	122113	Υ
Quintero	Heather	1275060683	Licensed Marriage and Family Therapist	132665	Υ
City: Susanville, CA Phone Number: (53	30) 257-6616			ogram	
Lock Nove o	First Name	NPI		License #	СС
Last Name	First Name	INFI	Type of License	LICEIISE #	
Program Name: Edgewood Center for Children and Families #39AV Type of Program: MH Address: 1801 Vincente Street - City: San Francisco, CA 94116 Phone Number: (415) 681-3211		Mental Health Services Behavioral Services Populations serve Cultural Abilities:	ion: Case Management Brokerage/Intensive Carvices including Intensive Home Based Services (Iles (TBS); Crisis Intervention ed: Children and Youth Provides outpatient mental health service		٧ / /
Non-English Langu	ayes.	website: www.edge	nday - Friday 8:30 am- 5:00 pm		
Last Name	First Name	NPI	Type of License	License #	СС
OUT OF COUNTY			71		
Program Name: Elite Family Systems- Banyan Home #39DC Type of Program: MH			ion: Case Management/Brokerage inlouding Inter; Mental Health Services including Intensive Homevention.		es

l	0.					
Address: 1708 Ban						
City: Ceres, CA 95307 Phone Number: 209-531-2088		5 14				
			ed: Youth & Adolescent			
			Short Term Residenital Treatment Therapeutic Pro	ogram		
		Office Hours: 24				
		website: www.elite	, ,			
Last Name	First Name	NPI	Type of License	License #	CC	
Program Name: Elite Family Systems-		Program Descript	tion: Case Management/Brokerage inlcuding Inter	nsive Care		
Blaker Home #39D	E	Coordinatiion (ICC)); Mental Health Services including Intensive Home	Based Servic	es	
Type of Program: M	1H	(IHBS); Crisis Inter	vention.			
Address: 3607 Bak	er Road					
City: Ceres, CA 953	307					
Phone Number: 209		Populations serve	ed: Youth & Adolescent			
			Short Term Residenital Treatment Therapeutic Pro	ngram		
Non-English Langu	aues.	Office Hours: 24		ogram		
Thorr English Langu	agos.	website: www.elite				
Last Name	First Name	NPI	Type of License	License #	СС	
Last Name	riist ivaille	1	Type of License	License "		
Drogram Namai El	ita Family Systems	Drogram Doogrint	ian. Casa Managament/Prakaraga inlauding Inter	L Soive Core		
Program Name: Elite Family Systems-						
Leslie Home #30D	R				000	
Leslie Home #39D		Coordinatiion (ICC)); Mental Health Services including Intensive Home		es	
Type of Program: M	IH); Mental Health Services including Intensive Home		es	
Type of Program: M Address: 2528 Lesl	IH ie Ln	Coordinatiion (ICC)); Mental Health Services including Intensive Home		es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953	1H ie Ln 807	Coordinatiion (ICC (IHBS); Crisis Inter); Mental Health Services including Intensive Homevention.		es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209	1H ie Ln 807	Coordinatiion (ICC (IHBS); Crisis Inter); Mental Health Services including Intensive Home vention. ed: Youth & Adolescent	Based Servic	es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ ♣	1H ie Ln 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities:); Mental Health Services including Intensive Homevention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro	Based Servic	es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209	1H ie Ln 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24	ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro	Based Servic	es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ ♣	1H ie Ln 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities:	ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro	Based Servic	es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ ♣	1H ie Ln 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24	ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro	Based Servic	cc	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ ᠳ Non-English Langu	1H ie Ln 307 9-531-2088 ages:	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite	yental Health Services including Intensive Home vention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org	e Based Servic		
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 ☐ と Non-English Langu	1H ie Ln 307 9-531-2088 ages:	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI	yental Health Services including Intensive Home vention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org	e Based Servic		
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 ☐ と Non-English Langu	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems-	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript	yention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro- Hours family.org Type of License	e Based Servic	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 Non-English Langu Last Name Program Name: El Scoffield Home #3	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript	ryention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter); Mental Health Services including Intensive Home	e Based Servic	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ と Non-English Langu Last Name Program Name: El Scoffield Home #3	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC)	ryention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter); Mental Health Services including Intensive Home	e Based Servic	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 Non-English Langu Last Name Program Name: El Scoffield Home #3 Type of Program: M Address: 3213 Urar	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD IH nus Drive	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC)	ryention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter); Mental Health Services including Intensive Home	e Based Servic	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD IH nus Drive 307	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter	ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter yention.	e Based Servic	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 ☐	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD IH nus Drive 307	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter	yention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter yention. ed: Youth & Adolescent	e Based Service Description D	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 △ ᠳ Non-English Langu Last Name Program Name: El Scoffield Home #3 Type of Program: M Address: 3213 Urar City: Ceres, CA 953	IH ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD IH nus Drive 307	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter	ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter yention.	e Based Service Description D	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 ☐	ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD 1H nus Drive 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24	ion: Case Management/Brokerage inlcuding Intensive Home vention. Type of License ion: Case Management/Brokerage inlcuding Intensive Home vention. Type of License Short Term Residenital Treatment Therapeutic Properties of the second of t	e Based Service Description D	CC	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 Characteristics Non-English Langu Last Name Program Name: El Scoffield Home #3 Type of Program: M Address: 3213 Urar City: Ceres, CA 953 Phone Number: 209	ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD 1H nus Drive 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite	yention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org Type of License tion: Case Management/Brokerage inlcuding Inter y; Mental Health Services including Intensive Home vention. ed: Youth & Adolescent Short Term Residenital Treatment Therapeutic Pro Hours family.org	bgram License # Insive Care Based Service Description	es	
Type of Program: M Address: 2528 Lesl City: Ceres, CA 953 Phone Number: 209 Characteristics Non-English Langu Last Name Program Name: El Scoffield Home #3 Type of Program: M Address: 3213 Urar City: Ceres, CA 953 Phone Number: 209	ie Ln 307 9-531-2088 ages: First Name ite Family Systems- 9DD 1H nus Drive 307 9-531-2088	Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24 website: www.elite NPI Program Descript Coordinatiion (ICC (IHBS); Crisis Inter Populations serve Cultural Abilities: Office Hours: 24	ion: Case Management/Brokerage inlcuding Intensive Home vention. Type of License ion: Case Management/Brokerage inlcuding Intensive Home vention. Type of License Short Term Residenital Treatment Therapeutic Properties of the second of t	e Based Service Description D	CC	

Program Name: Turning Point Community Program: Esperanza #39BX Type of Program: MH Address: 1803 W. March Lane Suite City: Stockton, CA 95207 Phone Number: (209) 636-5353		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Crisis Intervention. Full-Service Partnership Program; Evidenced Based model - ACT (Assertive Community Treatment) Populations served: Those diagnosed with a severe mental health diagnosis. Cultural Abilities: Veterans, LGBT, Older Adults, Physical Disabilities and Mental Health Diagnosis; Cultural AbilitiesTraining(s) required of each staff and offered regularly. Office Hours: Monday - Friday 8:30 am - 5:00 pm			
Last Name	First Name	website: www.tpo	Type of License	License #	СС
Jahangiri	Hameed	1497707731	Psychiatry & Neurology	A78392	Υ
Link	Autumn	1306483276	Professional Clinical Counselor	11425	Υ
Moore	Chermayne	1700396850	Licensed Marriage and Family Therapist	152655	Υ
Moreno	Sheila	1568026540	Clinical Social Worker	109900	Υ
Sorm	En	1518076249	Psychiatric Technician/ Licensed Vocational Nurse	28784/1768	Y
Wright	Kathryn	1245566520	Licensed Marriage and Family Therapist ption: Case Management Brokerage/Intensive Cal	77405	Y
Program Name: Fred Finch Youth Center #39AY Type of Program: MH Address: 3800 Coolidge Avenue City: Oakland, CA 94602 Phone Number: (510) 482-2244 \(\triangle \) Non-English Languages:		Mental Health Services including Intensive Home Based Services (IHBS); Therapeutic Behavioral Services (TBS); Crisis Intervention Populations served: Children and Youth Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday 8:30 am - 5 pm			
Last Name	First Name	website: www.fre	Type of License	License #	CC
	First Name Youth Center- OUT (1	License #	
	: G.L.O.M.A.R.F. 3 n: MH	•	ption: Crisis Residential Treatment Program		
Address: 1117 City: Stockton, (_			
City: Stockton, (Phone Number:	CA 95206 (209) 330-7155 x506	Populations ser			
City: Stockton, ((209) 330-7155 x506	Cultural Abilities Office Hours: 2	s: Crisis Residential Treatment Program 4 HOURS		
City: Stockton, (Phone Number: ロ と	(209) 330-7155 x506	Cultural Abilities	s: Crisis Residential Treatment Program 4 HOURS	License #	СС

Kaur	Amandaan	1072041027	Liconcod Marriago and Eamily Thoranict		
	<u> </u>		<u> </u>		Y
#39CD Type of Program Address: 8210 B City: French Ca Phone Number: \(\(\) Non-English Lan Last Name Alexander Kaur	Bright Road mp, CA 95231 (209) 330-7155 x508 mguages: First Name Nikeya Amandeep	Populations ser Cultural Abilitie Office Hours: 2 website: www.glo NPI 1093284275 1073041927	s: Adult Transitional Residential Treatment Progran 4 HOURS		CC Y
#39CC Type of Program Address: 458 Al City: Lodi, CA 9	mond Drive		,		
Phone Number:	5240 (209) 330-7155 x597	Populations ser			
		Cultural Abilitie	s: Crisis Residential Treatment Program		
Phone Number:	(209) 330-7155 x597		s: Crisis Residential Treatment Program		
Phone Number:	(209) 330-7155 x597	Cultural Abilitie	s: Crisis Residential Treatment Program 4 HOURS		
Phone Number:	(209) 330-7155 x597	Cultural Abilitie Office Hours: 24	s: Crisis Residential Treatment Program 4 HOURS	License #	СС
Phone Number:	(209) 330-7155 x597 nguages:	Cultural Abilitie Office Hours: 24 website: www.glo	s: Crisis Residential Treatment Program 4 HOURS om-arf.org	License # 137056	CC Y
Phone Number: Last Name	(209) 330-7155 x597 nguages: First Name	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927	s: Crisis Residential Treatment Program 4 HOURS Dm-arf.org Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist	137056 139250	Y
Phone Number: \(\text{\text{Last Name}} \) Last Name Alexander Kaur Program Name Community Se Type of Program	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7	Cultural Abilitie Office Hours: 24 website: www.glo NPI 1093284275 1073041927 Program Descri	s: Crisis Residential Treatment Program 4 HOURS om-arf.org Type of License Associate Marriage and Family Therapist	137056 139250	Y
Phone Number: \(\text{\text{Last Name}} \) Last Name Alexander Kaur Program Name Community Se Type of Program Address: 620 N	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups,	137056 139250	Y
Phone Number: \(\text{Last Name} \) Last Name Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, (riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7	Cultural Abilitie Office Hours: 24 website: www.glo NPI 1093284275 1073041927 Program Descri advocacy and lin	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed.	137056 139250 Individual thera	Y
Phone Number: \(\text{Last Name} \) Last Name Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, 0 Phone Number:	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Iption: Case management, Rehabilitation, Groups, Ikage, other resources as needed.	137056 139250 Individual thera	Y
Phone Number: \(\text{Last Name} \) Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, (Phone Number: \(\text{Last Name} \)	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519	Cultural Abilitie Office Hours: 24 website: www.glo NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type of License	137056 139250 Individual thera	Y
Phone Number: \(\text{Last Name} \) Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, (Phone Number: \(\text{Last} \) Non-English Lan	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519	Cultural Abilitie Office Hours: 24 website: www.glo NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist Point Case management, Rehabilitation, Groups, Ikage, other resources as needed. Type of License Associate Marriage and Family Therapist Iption: Case management, Rehabilitation, Groups, Ikage, other resources as needed.	137056 139250 Individual thera	Y
Phone Number: \(\text{Last Name} \) Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, (C) Phone Number: \(\text{Last} \) Non-English Last Spanish	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519 nguages:	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N website: https://w	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type of License Associate Marriage and Family Therapist Licensed Marriage And Licensed Marriage And Licensed Marriage And Licensed Marriage And Licensed Marriage A	137056 139250 Individual thera	Y Y ppy,
Phone Number: \(\cute{	riguages: First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519 nguages: First Name	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N website: https://w	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type d: Adults 18- Older Adult s: African American, LGBTQ, TAY, Adults, and Old Monday- Friday 8:00 am - 5:00 pm www.marymagdalenecs.com Type of License	137056 139250 Individual thera er Adults License #	Y Y Ppy,
Phone Number: \(\text{Last Name} \) Alexander Kaur Program Name Community Se Type of Program Address: 620 N City: Stockton, (C) Phone Number: \(\text{Last Name} \) Non-English Last Spanish Last Name Cash	First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519 nguages: First Name Deonne	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N website: https://w NPI 1881469377	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type d: Adults 18- Older Adult s: African American, LGBTQ, TAY, Adults, and Old Monday- Friday 8:00 am - 5:00 pm www.marymagdalenecs.com Type of License NA	137056 139250 Individual thera er Adults License # NA	Y Y Ppy,
Phone Number: \(\frac{\fir}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}	First Name Nikeya Amandeep : Mary Magdalene rvices n: MH Auora St. Ste #7 CA 95202 (209) 888-4519 nguages: First Name Deonne Janet	Cultural Abilitie Office Hours: 24 website: www.gld NPI 1093284275 1073041927 Program Descri advocacy and lin Populations ser Cultural Abilitie Office Hours: N website: https://w NPI 1881469377 1912406976	s: Crisis Residential Treatment Program HOURS Type of License Associate Marriage and Family Therapist Licensed Marriage and Family Therapist ption: Case management, Rehabilitation, Groups, kage, other resources as needed. Type of License Monday- Friday 8:00 am - 5:00 pm www.marymagdalenecs.com Type of License NA Associate Clinical Social Worker	137056 139250 Individual thera er Adults License # NA 89346	Y Y Ppy, CCC Y Y

Program Description: Case Management/ Brokerage including Intensive Care **Program Name: Turning Point** Coordination (ICC); Mental Health Services including Intensive Home Based Services Community Program- Justicia #39BY (IHBS); Crisis Intervention. Full-Service Partnership Program; Evidenced Based Model-Type of Program: MH ACT (Assertive Community Treatment) Address: 1803 W. March Lane Ste. C-D City: Stockton, CA 95207 Phone Number: (209) 636-5353 **Populations served:** Those diagnosed with a severe mental health diagnosis. Cultural Abilities: Veterans, LGBT, Older Adults, Physical Disabilities and Mental Health Diagnosis; Cultural AbilitiesTraining(s) required of each staff and offered regularly. △ দু Non-English Languages: Spanish, Office Hours: Monday - Friday 8:30 a.m. - 5:00 p.m. website: www.tpcp.org First Name **Last Name** NPI Type of License License # CC Jahangiri Hameed 1497707731 Psychiatry & Neurology A78392 Υ Υ Link Autumn 1306483276 Professional Clinical Counselor 11425 Moore Chermayne 1700396850 Licensed Marriage and Family Therapist 152655 Υ Moreno Sheila 1568026540 Clinical Social Worker 109900 Υ Sorm 1518076249 Psychiatric Technician/Licensed Vocational 128784/1768 Υ En Licensed Marriage and Family Therapist Wright Kathryn 1245566520 77405 **Program Name: Latino Behavioral** Program Description: Case Management/ Brokerage; Mental Health Services; Crisis Health and Recovery Services #90671 Intervention Type of Program: MH Address: 237 E. Channel Street City: Stockton, CA 95202 Phone Number: (209) 444-8910 Populations served: Adult O & **Cultural Abilities:** Provides Culturally Competent Services to Latinos Office Hours: Monday - Friday 8:00 am - 5:00 pm Non-English Languages: Spanish www.elconcilio.org NPI License # CC Type of License **Last Name First Name** Herron Breanna 1568988251 Associate Marriage and Family Therapist 112555 Υ Swanson Alisha 1790908242 Licensed Marriage and Family Therapist 124571 Υ **Program Name: Martin Gipson Program Description:** Case Management/ Brokerage; Mental Health Services; Crisis Socialization Center #9041 Intervention #9043 Type of Program: MH Address: 405 E. Pine Street City: Stockton, CA 95204 Phone Number: (209) 464-5519 Populations served: Adult Cultural Abilities: Provides socialization, vocational, and educational opportunities for 08 Adult Mentally ill beneficiaries.

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

Non-English Languages: Spanish

		website: https://ww	w.sjcbhs.org/adult.aspx#martin_gipson_center			
Last Name	First Name	NPI	Type of License	License #	CC	
NON LICENSED S	STAFF ONLY					
Program Name: Parents By Choice #39BL Type of Program: MH Address:306 E Main St. Suite 300 City: Stockton, CA 95202		Program Description: Case Management/Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services; Crisis Intervention Populations served: Children, Adolescents, and Families Cultural Abilities: Therapeutic Foster Care/Mental Health Services; Positive Parenting Classes; Foster Care/Adoptions; Transitional Housing Program				
Non-English Lang	uages: Spanish	Office Hours:	Monday - Friday 10:00 am - 6:00 pm			
11011 =11911011 =0119	aagoor opamen	website: www.pare	, , , , , , , , , , , , , , , , , , ,			
Last Name	First Name	NPI	Type of License	License #	СС	
Andrade	Louisa	1679941306	Licensed Marriage and Family Therapist	145133	Υ	
Crusos	Amanda	1700418084	Licensed Clinical Social Worker	115858	Υ	
Lo	Christopher	1891463345	Associate Social Worker	86400	Υ	
Oliviera	Carlos	1992101612	Licensed Marriage and Family Therapist	116198	Υ	
Ramos	Mayra	1336552553	Licensed Marriage and Family Therapist	113207	Υ	
Ruiz Velasco	Johanna	1548041114	Associate Clinical Social Worker	122353	Υ	
Type of Program: Address: 9951 Ho City: Sacramento,	rn Road Suite B CA 95827-1955					
Phone Number: (9	116) 364-5533	Populations served: Adult				
△ 🕭			Provides outpatient mental health services			
Non-English Lang	uages: Spanish	Office Hours: Monday Friday 7:30 am-6:00 pm				
	_	website: www.psyr				
Last Name	First Name	NPI	Type of License	License #	CC	
Program Name P Sacramento #39 Type of Program: Address: 4604A R City: Sacramento,	synergy - CJ MH oosevelt Avenue	Program Descript Intervention; Medic	ion: Case Management/ Brokerage; Mental Heration support	ealth Services;	Crisis	
Phone Number:(9		Populations served: Adult Cultural Abilities: Provides outpatient mental health services				
Non-English Lang	uages: Spanish	Office Hours: Mor	nday Friday 7:30 am-6:00 pm nergy.org			
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNT	Y PROVIDER					
Abbott	Kristi	1053574202	Licensed Clinical Social Worker	65194	Υ	

Arreola	Yvette	NA	Peer Specialist	NA	Υ
Balbi	Miranda	1891249926	Licensed Marriage and Family Therapist	111807	Υ
Cross	Hailey	1679060396	Associate Professional Clinical Counselor	10875	Υ
Effiong	Eunice	1881254704	MHRS	NA	Υ
Elliot	James	1033316732	MHRS	NA	Υ
Her	Alyssa	1184397838	Associate Marriage and Family Therapist	149802	Υ
Jacques	Adrian	1629541446	Associate Professional Clinical Counselor	8361	Υ
Kuglar	Aeric	1023360757	MHRS	NA	Υ
Palacio	Alex	1952123853	Associate Marriage and Family Therapist	141807	Υ
Palma	Efrain	1770151300	MHRS	NA	Υ
Pan	Abram	1225666928	Medical Doctor	A99238	Υ
Pierre	Jorene	1467943712	MHRS	NA	Υ
Pragasa	Sheryll	1770101735	Licensed Vocational Nurse	708103	Υ
Pritchett Roberts	Carlissa	1184485781	MHRS	NA	Υ
Reddy	Sheela	1700045424	Medical Doctor	A106025	Υ
Salter	Savanna	1891484010	Peer Support	NA	Υ
Sanders	Laurel	1235911942	Licensed Vocational Nurse	723573	Υ
Schwedler	Grace	1215658117	Associate Social Worker	109181	Υ
Stringer	Samantha	1215751136	OQP	NA	Υ
Valdo-	Javier	1538510292	MHRS	NA	Υ
Valdez	Javici	1330310232	וויוותט	IIVA	
Vue Program Name: Ps	Anna	1134759376	Nurse Practioner tion: Case Management/ Brokerage; Mental Hea	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro	Anna synergy - ic B #39CH IH osevelt Avenue	1134759376	Nurse Practioner tion: Case Management/ Brokerage; Mental Hea	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Roc City: Sacramento, C	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820	1134759376 Program Descrip Intervention; Medi	Nurse Practioner tion: Case Management/ Brokerage; Mental Hea cation Support	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820	1134759376 Program Descrip Intervention; Medi	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 △ ♣	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876	1134759376 Program Descrip Intervention; Medi Populations serv Cultural Abilities	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876	Populations serve Cultural Abilities Office Hours: M	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 △ ♣	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876	1134759376 Program Descrip Intervention; Medi Populations serv Cultural Abilities	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm	95012482	Υ
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 △ ﴿ Non-English Langua	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name	Populations serve Cultural Abilities Office Hours: Mediane Med	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm /nergy.org	95012482 Ith Services; C	Y
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 △	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name	Populations serve Cultural Abilities Office Hours: Mediane Med	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm /nergy.org	95012482 Ith Services; C	Y
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 △	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License	95012482 Ith Services; C	risis
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support red: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm regy.org Type of License Associate Social Worker	95012482 Ilth Services; C	Y risis
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Roc City: Sacramento, C Phone Number: (91 △	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist	95012482 Ilth Services; C	CC Y
Vue Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa Laura	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386 1023853801	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist Certified Peer Specialist	95012482 Ilth Services; C	CC Y Y Y
Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 C Non-English Langua Last Name OUT OF COUNTY Allen Arnett Asay-Bemis Bhullar	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa Laura Annitra	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386 1023853801 1639712508	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist Certified Peer Specialist Associate Marriage and Family Therapist	95012482 Ilth Services; C License # 122829 127309 NA 147057	CC Y Y Y Y
Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Roc City: Sacramento, C Phone Number: (91 \(\triangle \) Non-English Langua Last Name OUT OF COUNTY Allen Arnett Asay-Bemis Bhullar Dunn	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa Laura Annitra Catherine	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386 1023853801 1639712508 1780366880	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support red: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist Certified Peer Specialist Associate Marriage and Family Therapist Licensed Vocational Nurse	95012482 Ith Services; C License # 122829 127309 NA 147057 734823	CC Y Y Y Y Y
Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Ro City: Sacramento, C Phone Number: (91 □	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa Laura Annitra Catherine Ben	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386 1023853801 1639712508 1780366880 1801156567	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support ed: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm /nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist Certified Peer Specialist Associate Marriage and Family Therapist Licensed Vocational Nurse Licensed Clinical Social Worker	95012482 Ith Services; C License # 122829 127309 NA 147057 734823 76696	Y risis CC Y Y Y Y Y Y
Program Name: Ps Sacramento - Clini Type of Program: M Address: 4604A Roc City: Sacramento, C Phone Number: (91 Non-English Langua Last Name OUT OF COUNTY Allen Arnett Asay-Bemis Bhullar Dunn Fowler Henderson	Anna synergy - ic B #39CH IH osevelt Avenue CA 95820 6) 379-5876 ages: Spanish First Name PROVIDER Coleen Melissa Laura Annitra Catherine Ben Molene	Program Descrip Intervention; Medi Populations serv Cultural Abilities Office Hours: M website: www.psy NPI 1518601418 1215325386 1023853801 1639712508 1780366880 1801156567 1508412495	Nurse Practioner tion: Case Management/ Brokerage; Mental Heacation Support red: Adult : Provides outpatient mental health services onday Friday 7:30 am-6:00 pm //nergy.org Type of License Associate Social Worker Associate Marriage and Family Therapist Certified Peer Specialist Associate Marriage and Family Therapist Licensed Vocational Nurse Licensed Clinical Social Worker MHRS	95012482 Ith Services; C License # 122829 127309 NA 147057 734823 76696 NA	CC Y Y Y Y Y Y Y

Program Name: Psynergy Greenfield Provider - #39CZ		Program Description: Case Management/ Brokerage; Mental Health Services; Crisis Intervention; Medication Support				
Type of Program: MH						
Address: 215 Huer	Address: 215 Huerta Avenue City: Greenfield, CA 93927 Phone Number: 408-465-8280					
City: Greenfield, CA						
Phone Number: 40			ved: Adult			
<u> </u> △ &		Cultural Abilities	: Provides outpatient mental health services			
Non-English Langu	ages: Spanish	Office Hours: Monday Friday 7:30 am-6:00 pm				
		website: www.psy	ynergy.org			
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNTY	PROVIDER					
Aquino	MaCindy	1043684095	Licensed Vocational Nurse	291024	Υ	
De La Cruz	Noah	1497424733	Associate Social Worker	103458	Υ	
Leigh-Brampton	Ricki	1487964755	Medical Doctor	A119619	Υ	
Morales	Melissa	1669129664	MHRS	NA	Υ	
Nunez	Andrea	1235918038	Peer Support	NA	Υ	
Sanchez	Samantha	NA	Peer Support	NA	Υ	
Uribe	Bianca	1386213981	MHRS	NA	Υ	
Villalobos-						
Campbell	Angela	1992394357	Associate Marriage and Family Therapist	144243	Υ	
Vradenburg	Amalia	1467298554	Associate Professional Clinical Counselor	16940	Υ	
Program Name: P	synergy Morgan Hill	Program Descrip	otion: Case Management/ Brokerage; Mental Hea	Ith Services; C	risis	
Provider - #39CY		Intervention; Medi	ication Support			
Type of Program: N	ИΗ					
Address: 18217 Ha						
City: Morgan Hill, C						
Phone Number: 40		Populations serv	ved: Adult			
۵ فح	·	Cultural Abilities: Provides outpatient mental health services				
	0					
Non-English Langu	ages: Spanish	Office Hours: Monday Friday 7:30 am-6:00 pm				
	Τ.	website: www.psy		I. •		
Last Name	First Name	NPI	Type of License	License #	CC	
OUT OF COUNTY						
Barbaran	Alexander	1063191476	MHRS	NA	Υ	
Briggs	Heather	1447643168	Licensed Marriage and Family Therapist	82437	Υ	
Downs	Courtney	1316778293	Associate Professional Clinical Counselor	16563	Υ	
Garcia	Yvonne	1659787604	MHRS	NA	Υ	
Garibay	Jacqueline	1588128425	MHRS	NA	Υ	
Herbert	Tom	1386378107	MHRS	NA		
King	Christopher	1477252765	Associate Social Worker	113335	Υ	
Lilly	Matthew	1346571643	Medical Doctor	A127216	Υ	
Ramos	Eileen	1568092914	MHRS	NA	Υ	
			Licensed Marriage and Family Therapist			

Program Name: Some Children's Center #39B7 Type of Program: Normal Address: 4740 Normal City: Covina, CA 9 Phone Number: (62) Non-English Langue Last Name	Out Patient IH Grand Avenue 1724 26) 859-2089	Coordination (ICC) (IHBS); Medication Populations serve Cultural Abilities:	ion: Case Management/ Brokerage including In; Mental Health Services including Intensive Hon a Support; Crisis Intervention ed: Children and Youth Provides outpatient mental health services anday - Friday 8 am- 5 pm abrielchild.com Type of License		es
OUT OF COUNTY			Type of Electric		
Program Name: S #39CM Type of Program: N Address: 337 S. El City: Azusa, CA 91	ЛН nid Avenue	(ICC); Mental Hea	ion: Case Management Brokerage/Intensive C Ith Services including Intensive Home Based Ser ioral Services (TBS); Medication Support; Crisis I	vices (IHBS);	1
Phone Number: (62	26) 859-2089	Populations serve	ed: Children and Youth		
o Ġ .	·	Cultural Abilities:	Provides outpatient mental health services		
Non-English Langu	ages:	Office Hours: Mo	nday - Friday 8 am- 5 pm		
	_	website: www.sang			
Last Name	First Name	NPI	Type of License	License #	CC
OUT OF COUNTY	PROVIDER				
22. 2. 200111	INOVIDEN				
Program Name: Some Type of Program: Naddress: 5329 N. I City: Azusa, CA 91 Phone Number: (62	GCC-Homerest MH Homerest Avenue 702 26) 859-2089	(ICC); Mental Hea Therapeutic Behav Populations serve Cultural Abilities: Office Hours: Mo	ion: Case Management Brokerage/Intensive C Ith Services including Intensive Home Based Ser ioral Services (TBS); Medication Support; Crisis I ed: Children and Youth Provides outpatient mental health services inday - Friday 8 am- 5 pm igabrielchild.com	vices (IHBS);	1
Program Name: S Type of Program: N Address: 5329 N. I City: Azusa, CA 91 Phone Number: (62	GCC-Homerest MH Homerest Avenue 702 26) 859-2089	(ICC); Mental Hea Therapeutic Behav Populations serve Cultural Abilities:	Ith Services including Intensive Home Based Serioral Services (TBS); Medication Support; Crisis I ed: Children and Youth Provides outpatient mental health services Inday - Friday 8 am- 5 pm	vices (IHBS);	CC
Program Name: Some Type of Program: Non-English Langu	GCC-Homerest MH Homerest Avenue 702 26) 859-2089 ages: First Name	(ICC); Mental Hea Therapeutic Behav Populations serve Cultural Abilities: Office Hours: Mo website: www.sang	Ith Services including Intensive Home Based Services (TBS); Medication Support; Crisis Intensive Home Based Services (TBS); Me	vices (IHBS); ntervention	
Program Name: S Type of Program: N Address: 5329 N. I City: Azusa, CA 91 Phone Number: (62 Non-English Langu Last Name	GCC-Homerest MH Homerest Avenue 702 26) 859-2089 ages: First Name	(ICC); Mental Hea Therapeutic Behav Populations serve Cultural Abilities: Office Hours: Mo website: www.sang	Ith Services including Intensive Home Based Services (TBS); Medication Support; Crisis Intensive Home Based Services (TBS); Me	vices (IHBS); ntervention	
Program Name: Some Type of Program: Note Address: 5329 N. In City: Azusa, CA 91 Phone Number: (62 Phon	GCC-Homerest MH Homerest Avenue 702 26) 859-2089 ages: First Name PROVIDER an Joaquin Connect MH orgetown Place, Suite 95207	Populations serve Cultural Abilities: Office Hours: Mo website: www.sang NPI Program Descript Coordination (ICC)	Ith Services including Intensive Home Based Serviceal Services (TBS); Medication Support; Crisis Intervices (TBS); Medication Support; Crisis Intervention Support; Crisis Intervention Support; Crisis Intervention Support; Crisis Intervention	License #	CC

		environment with	: Full Services Partnership (FSP) model where sta services that are based on needs, hopes, and drea ness for those discharged from acute care facilities	ams of adults w		
Non-English Lang	guages: Spanish,	Office Hours: Monday - Friday 8:30 am- 5 pm				
		website: www.tele	ecarecorp.com			
Last Name	First Name	NPI	Type of License	License #	CC	
Aguilar	Shelly	1952969008	Nurse Practitioner	22945	Υ	
Dominguez	Kristen	1205663895	Vocational Nurse	721186	Υ	
Hayes	Morackot	1255153169	Registered Nurse	806387	Υ	
Lorenz	Arthur	1477603249	Licensed Marriage and Family Therapist	45350	Υ	
Williams Tyresha		1588160865	Associate Clinical Social Worker	118678	Υ	
Program Name: Summitview Child Treatment Center #9061 Type of Program: MH Address: 670 Placerville Dr. #2 City: Placerville, CA 95667 Phone Number: (530) 644-2412 Last Name First Name OUT OF COUNTY PROVIDER Program Name: Telecare (aka Jeremy		Program Description: Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHSB); Medication Support; Crisis Intervention Populations served: Children and Youth Cultural Abilities: Provides outpatient mental health services Office Hours: Monday - Friday 8 am- 5 pm website: www.summitviewtreatment.org NPI Type of License CC				
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je	TY PROVIDER Telecare (aka Jeremy MH eremy Way			License #	СС	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA	Telecare (aka Jeremy MH eremy Way A 95212		otion: Crisis Residential Treatment Program	License #	СС	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (2	Telecare (aka Jeremy MH eremy Way A 95212	Program Descrip	otion: Crisis Residential Treatment Program	License #	CC	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969	Program Descrip	otion: Crisis Residential Treatment Program ved: Adult c: Crisis Residential Treatment Program	License #	CC	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969	Program Descrip Populations serv Cultural Abilities	otion: Crisis Residential Treatment Program /ed: Adult :: Crisis Residential Treatment Program HOURS	License #	CC	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969	Program Descrip Populations serv Cultural Abilities Office Hours: 24	otion: Crisis Residential Treatment Program /ed: Adult :: Crisis Residential Treatment Program HOURS	License #	СС	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1) Check Non-English Lang	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969 guages:	Program Descrip Populations serv Cultural Abilities Office Hours: 24 website: www.tele	ved: Adult :: Crisis Residential Treatment Program HOURS ecarecorp.com			
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1) Check Non-English Lang Last Name Huynh	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969 guages: First Name	Program Descrip Populations serv Cultural Abilities Office Hours: 24 website: www.tele	ved: Adult c: Crisis Residential Treatment Program HOURS ccarecorp.com Type of License	License #	СС	
OUT OF COUNT Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1) Che Non-English Lang Last Name Huynh Reiland Taylor	Telecare (aka Jeremy MH Peremy Way A 95212 209) 888-4969 Guages: First Name Thuy Jessica Shannan	Program Descrip Populations serve Cultural Abilities Office Hours: 24 website: www.tele NPI 1033485495 1003154634 1528074770	ved: Adult S: Crisis Residential Treatment Program HOURS Ecarecorp.com Type of License Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Marriage and Family Therapist	License # 36454 70377 46081	CC Y	
Program Name: House) #39AX Type of Program: Address: 5634 Je City: Stockton, CA Phone Number: (1) Non-English Lang Last Name Huynh Reiland Taylor Program Name: Intervention Rec (TEIRS) #39B2 Type of Program:	Telecare (aka Jeremy MH eremy Way A 95212 209) 888-4969 guages: First Name Thuy Jessica Shannan Telecare Early covery Services MH eorgetown Place, Suite	Program Descrip Populations serve Cultural Abilities Office Hours: 24 website: www.tele NPI 1033485495 1003154634 1528074770 Program Descrip	ved: Adult S: Crisis Residential Treatment Program HOURS Ecarecorp.com Type of License Licensed Psychiatric Technician Associate Clinical Social Worker Licensed Marriage and Family Therapist Otion: Case Management/ Brokerage including Intersive Hone	License # 36454 70377 46081 ensive Care	CC Y Y	

Non-English Lang	uages: Spanish				
			onday - Friday 8 am- 5 pm		
		website: www.tele			
Last Name	First Name	NPI	Type of License	License #	CC
Aguilar	Shelly	1093239436	Nurse Practitioner	22945	Υ
Alonzo Moore	Tiffany	1720707193	Associate Marriage and Family Therapist	132956	Υ
Costello	Courtney	1639843659	Associate Marriage and Family Therapist	144592	Υ
Nelson	Tonya	1932483385	Licensed Psychiatric Technician	26756	Υ
Palaca	Anthony	1144971060	144971060 Associate Clinical Social Worker 9:		Υ
Roberts	Tanya	1912042375	Licensed Clinical Social Worker	20414	Υ
Russell	David	1477167666	Nurse Practitioner	95039943	Υ
Address: 4545 Georgetown Place, Suite D & E28 City: Stockton, CA 95207 Phone Number: (209) 269-5587 Non-English Languages: Spanish,		environment with serious mental illr Office Hours: Mo	s: Full Services Partnership (FSP) model where state services that are based on needs, hopes, and dreamess. Sonday - Friday 8:30 am- 5 pm		
Cambodian		website: www.tele			
	Final Manage			Hiconco #	CC
Last Name	First Name	NPI 1205663805	Type of License	License #	
Last Name Dominguez	Kristen	1205663895	Vocational Nurse	721186	Y
Last Name Dominguez Hayes	Kristen Morackot	1205663895 1255153169	Vocational Nurse Registered Nurse	721186 806387	Y
Last Name Dominguez Hayes Lorenz	Kristen Morackot Arthur	1205663895 1255153169 1477603249	Vocational Nurse Registered Nurse Licensed Marriage and Family Therapist	721186 806387 45350	Y Y Y
Last Name Dominguez Hayes Lorenz Monroy	Kristen Morackot Arthur Aldo	1205663895 1255153169 1477603249 1700354719	Vocational Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker	721186 806387 45350 104609	Y Y Y Y
Last Name Dominguez Hayes Lorenz Monroy Russell	Kristen Morackot Arthur Aldo David	1205663895 1255153169 1477603249 1700354719 1477167666	Vocational Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Nurse Practitioner	721186 806387 45350 104609 95015254	Y Y Y Y
Last Name Dominguez Hayes Lorenz Monroy Russell Van Ness	Kristen Morackot Arthur Aldo David JohnMark	1205663895 1255153169 1477603249 1700354719 1477167666 1679237861	Vocational Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Nurse Practitioner Associate Professional Clinical Counselor	721186 806387 45350 104609 95015254 13809	Y Y Y Y
Last Name Dominguez Hayes Lorenz Monroy Russell Van Ness Program Name: Connect II #390 Type of Program:	Kristen Morackot Arthur Aldo David JohnMark Telecare San Joaquin	1205663895 1255153169 1477603249 1700354719 1477167666 1679237861 Program Descri Coordination (ICC	Vocational Nurse Registered Nurse Licensed Marriage and Family Therapist Associate Clinical Social Worker Nurse Practitioner	721186 806387 45350 104609 95015254 13809 tensive Care	Y Y Y Y Y

a 占 .		environment with se	Full Services Partnership (FSP) model where staf ervices that are based on needs, hopes, and drea ess and who are involved with, or at risk of being in tem.	ms of adults wi	th			
Non-English Languages: Spanish, Cambodian			Office Hours: Monday - Friday 8:30 am - 5:00 pm					
			website: www.telecarecorp.com					
Last Name Dominguez	First Name Kristen	1205663895	Type of License Vocational Nurse	721186	Y			
Hayes	Morackot	1255153169	Registered Nurse	806387	Y			
Lorenz	Arthur	1477603249	Licensed Marriage and Family Therapist	45350	Y			
Monroy	Aldo	1700354719	Associate Clinical Social Worker	104609	Y			
Russell	David	1477167666	Nurse Practitioner	95015254	Y			
Van Ness	JohnMark	1679237861	Associate Professional Clinical Counselor	13809	Y			
Address:7224 S Phone Number	Type of Program: MH Address:7224 S. Recovery Road Phone Number: (209) 888-6595 ム よ Non-English Languages: Spanish		narge planning, 24/7 staff support, and medication ed: Adults 18+ Monday - Friday 8:00 am - 4:30 pm	. Stabilization.				
		website: https://ww	w.tcp.org/program/sage-village/					
Abbasi	Kafia	1215114897	Physician	A113195	Υ			
Fuller	Kenya	1063256139	Licensed Psychiatric Technician	40338				
Mbithi	Ruth	1740042233	Licensed Psychiatric Technician	37510	Υ			
Payton	Geoffrey	1942899521	Associate Professional Clinical Counselor	11270	Υ			
Spiller	Janelle		Certified SUD Counselor	NA				
Stevens	Staci		Licensed Psychiatric Technician	27672	Υ			
Community Pr #39DP	Program Name: Turning Point Community Program - Sage Village II #39DP		Program Description: 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.					
Type of Program Address:7236 S City: French Ca	S. Recovery Road							
Phone Number	: (209) 888-6595	Populations serve	ed: Adults 18+					
<u>ا</u> لج		Cultural Abilities:						
Non-English La	nguages: Spanish	Office Hours:	Monday - Friday 8:00 am - 4:30 pm					
		website: https://ww	w.tcp.org/program/sage-village/					

	lv 6:	1245444007	In · ·	1442405	l.,		
Abbasi	Kafia	1215114897	·	A113195			
Alvarez	Timothy		Associate Professional Clinical Counselor	14835			
Ceja	Isabel		Licensed Vocational Nurse	735997	Υ		
Contreras	Irene		Licensed Vocational Nurse	724129			
Franklin	Alyssa		Associate Professional Clinical Counselor	11543			
Spiller	Janelle		Certified SUD Counselor	NA			
Counseling Ser (Manteca) #904 Type of Program Address:129 E. (City: Manteca, C	O D: MH Center Street, Suite 3 A 95336	Coordination (ICC); (IHBS); Medication	ion: Case Management/ Brokerage including Inte Mental Health Services including Intensive Hom Support; Crisis Intervention		es		
Phone Number: (209) 239-5553		Cultural Abilities: families living in So therapy, case mana Office Hours: Mon	Populations served: Children and Youth Cultural Abilities: Comprehensive mental health services for children, youth, and their families living in South/Central County area. Services include individual and group therapy, case management, psychiatric assessment, and medication support. Office Hours: Monday-Friday 8:00 am- 5:00 pm website: https://www.valleycommunitycounselingservices.org				
Last Name	First Name				СС		
Amancio	Isabel	1194868695	Licensed Marriage and Family Therapist	39580	Υ		
Garcia	Odalis	1669169561	Associate Marriage and Family Therapist	141967	Υ		
Hira Brar	Shabneet	1851598452	Physician	A112447	Υ		
Kamran	Muhammad	1811051337	Physician	C53847	Υ		
Martin	Brittney	1366130635	Associate Marriage and Family Therapist	152389	Υ		
Navarro	Jessica	1083344790	Associate Marriage and Family Therapist/ PCCI	133988/11 938	Y		
Pena	Adriana	1295253797	Associate Marriage and Family Therapist	97389	Υ		
Rios	Judybeth	1346762499	Licensed Professional Clinical Counselor	16137	Υ		
Viles-Reed	Teresa	1386762623	Psychologist	14848	Υ		
Program Name: Valley Community Counseling Services (VCCS) (School Based Program - Stockton) #9042 Type of Program: MH Address: 6707 Embarcadero Drive, City: Stockton, CA 95219		Program Description: Individual/family/group/plan development/assessment/collateral /rehab/Case Management/ Brokerage including Intensive Care Coordination (ICC); Mental Health Services including Intensive Home Based Services (IHBS); Medication Support; Crisis Intervention					
Phone Number:		Populations serve	d: Children and Youth				
۵ ن ے	()	•	Outpatient mental health services provided at var	ious schools in			
	guages:	Office Hours:	Monday - Friday 8:00 am - 5:00 pm				
Non-English Languages:		website: https://www.valleycommunitycounselingservices.org					

Last Massa	E' No	NDI			
Last Name	First Name Adriana	NPI 1295253797	Type of License	License # 97389	CC Y
Pena Vilos Bood		+	Associate Marriage and Family Therapist		Y
Viles-Reed	Teresa: Valley Community	1386762623	Psychologist	14848	<u> </u>
_			otion: Case Management/ Brokerage including Intel C); Mental Health Services including Intensive Hon		000
Counseling Services (VCCS) (Tracy) #9041		· ·	on Support; Crisis Intervention	ne baseu servic	, C S
Type of Progran	n: MH				
Address: 19 Eas	st 6th Street				
City: Tracy, CA	95378				
	(209) 835-8583	Populations serv	ved: Children and Youth		
Ė	` ,	Cultural Abilities	: Full range specialty mental health services for ch	nildren and youth	n in
		South County are	ea.	·	
Non-English Lar	nguages:	Office Hours: Mo	onday - Friday 8:00 am - 5:00 pm		
J			ww.valleycommunitycounselingservices.org		
Last Name	First Name	NPI	Type of License	License #	СС
Amancio	Isabel	1194868695	Licensed Marriage and Family Therapist	39580	Υ
Cervantes	Rosemary	1407299738	Licensed Marriage and Family Therapist	127214	Υ
Hira Brar	Shabneet	1851598452	Physician	A112447	Υ
Kamran	Muhammad	1811051337	Physician	C53847	Υ
Rios	Judybeth	1346762499	Licensed Professional Clinical Counselor	16137	Υ
Roy	Reshma	1073061784	Associate Clinical Social Worker	103567	Υ
Viles-Reed	Teresa	1386762623	Psychologist	14848	Υ
	: Victor Community	Program Descrip	otion: Case Management/ Brokerage including Inte	ensive Care	<u> </u>
_	upport, Stockton,		C); Mental Health Services including Intensive Hon		es
(VCSS) #9063		,	on Support; Crisis Intervention		
Type of Program		,			
Address: 2495 V					
City: Stockton,					
•	(209) 465-1080	Populations serv	ved: Children and Youth		
	()		: Provides outpatient mental health services in-ho	me and in comm	nunity
۵ خ			'		,
— ເວັ Non-English Lar	nguages:	Office Hours: Mo	onday - Friday 8:00 am - 5:00 pm		
. ton English Lai			tor ora		
Tion English Lai		website: www.vic	tor.org		
_	First Name	NPI	Type of License	License #	CC
Last Name	First Name Krissie			License # 125000	CC Y
Last Name Abdullahi		NPI	Type of License		
Last Name Abdullahi Allen	Krissie	NPI 1407307762	Type of License Associate Marriage and Family Therapist	125000	Υ
Last Name Abdullahi Allen Bhangu	Krissie Laterra	NPI 1407307762 1285290346	Type of License Associate Marriage and Family Therapist Associate Clinical Social Worker	125000 118662	Y
Last Name Abdullahi Allen Bhangu Binder	Krissie Laterra Simran	NPI 1407307762 1285290346 1740765338	Type of License Associate Marriage and Family Therapist Associate Clinical Social Worker Associate Professional Clinical Counselor	125000 118662 12381	Y Y Y
Last Name Abdullahi Allen Bhangu Binder Chee Dadkhah	Krissie Laterra Simran Tiya	NPI 1407307762 1285290346 1740765338 1457071581	Type of License Associate Marriage and Family Therapist Associate Clinical Social Worker Associate Professional Clinical Counselor Associate Marriage and Family Therapist	125000 118662 12381 146517	Y Y Y

BHC Heritage C Type of Program	n: MH Auburn Boulevard o, CA 95841 (916) 489-3336	Program Descri Populations ser Cultural Abilities Office Hours: 24	s: Interpreter Services available for language other				
Segale Simpson Contract Psych BHC Heritage C Type of Program Address: 4250 A City: Sacrament Phone Number (Daks Hospitals Daks Hospital n: MH Auburn Boulevard o, CA 95841 (916) 489-3336	Program Descri Populations ser Cultural Abilities Office Hours: 24	ved: All Ages S: Interpreter Services available for language other	lental Health			
Segale Simpson Contract Psych BHC Heritage C Type of Program Address: 4250 A City: Sacrament Phone Number (Daks Hospitals Daks Hospital n: MH Auburn Boulevard o, CA 95841 (916) 489-3336	Program Descri	ption: Children's & Adult General & Specialized N ved: All Ages : Interpreter Services available for language other	lental Health	1		
Segale Simpson Contract Psych BHC Heritage C Type of Program Address: 4250 A City: Sacrament Phone Number (Daks Hospitals Daks Hospital Daks Hospital Daks Hospital Daks Hospital Daks Hospitals Daks Hospitals Daks Hospitals	Program Descri	ption: Children's & Adult General & Specialized M	lental Health	1		
Segale Simpson Contract Psych BHC Heritage C Type of Program Address: 4250 A City: Sacrament	Daks Hospitals Daks Hospital Daks Hospital Daks Hospital Daks Hospital Daks Hospitals Daks Hospitals Daks Hospitals	Program Descri	ption: Children's & Adult General & Specialized N				
Segale Simpson Contract Psych BHC Heritage C Type of Program Address: 4250 A	niatric Hospitals Daks Hospital n: MH Auburn Boulevard				1		
Segale Simpson Contract Psych BHC Heritage C Type of Program	niatric Hospitals Daks Hospital						
Segale Simpson Contract Psych BHC Heritage C	niatric Hospitals Daks Hospital				<u> </u>		
Segale Simpson Contract Psych	niatric Hospitals				T		
Segale Simpson		1760214476	Associate Clinical Social Worker	92259	ı		
Segale		1780214478		102350	Υ		
	Kayla	1114614559	Associate Professional Clinical Counselor	15348	Υ		
	Jacquelyn	1124250204	Licensed Marriage and Family Therapist	115647	Υ		
Ramos	Alisia	1508418666	Associate Clinical Social Worker	90719	Υ		
Olaguez	Jasmine	1679057368	Licensed Marriage and Family Therapist	146988	Y		
McNichols	April	1184361693	Associate Clinical Social Worker	117453	Y		
Martinez	Kiara	1669955407	Associate Clinical Social Worker	118299	Υ		
Lopez	Mike	1356813182	Associate Clinical Social Worker	100731	Υ		
Langham	Kathryn	1598925901	Psychiatrist	112928	Υ		
Ifeanyi	Jimmy	1679189724	Associate Marriage and Family Therapist	132326	Υ		
Diaz	Claudia	1275810442	Licensed Marriage and Family Therapist	99791	Υ		
Chee	Christopher	1447480173	Psychiatrist	12207	Υ		
Last Name	First Name	NPI	Type of License	License #	CC		
		website: www.vic	website: www.victor.org				
Non-English Lar	iguages:	Office Hours: M	onday - Friday 8:00 am - 5:00 pm				
△ Ġ .		Cultural Abilities	s: Provides outpatient mental health services in-hor	me and in comr	nunity.		
Phone Number:	(209) 647-6200	Populations ser	ved: Children and Youth				
City: Manteca, C							
• • • • • • • • • • • • • • • • • • • •	erry Lane, Suite 101 &						
Type of Program	n: MH	/···					
Support Service	ces - Manteca #39CG	Coordination (ICC	C); Mental Health Services including Intensive Hon	ne Based Servi	ces		
Program Name	: Victor Community	Program Descri	otion: Case Management/ Brokerage including Ir	ntensive Care			
Varela	Wendy	1154832830	Associate Marriage and Family Therapist	136414	Υ		
Rodriguez	Maria	1003123241	Licensed Professional Clinical Counselor	16624	Υ		
Pandey	Mia	1437563384	Licensed Professional Clinical Counselor	15492	Υ		
Mitchell	Gladys	1861943201	Associate Clinical Social Worker	120076	Υ		
Langham	Kathryn	1598925901	Physician	112928	Υ		
	Yesena	1609592930	Associate Professional Clinical Counselor	12985	Υ		
Lamb	Giana	1720318132	Licensed Marriage and Family Therapist	86206	Y		
Farias Kooger Lamb	Grace Angela	1023848736 1013457878	Associate Clinical Social Worker Associate Clinical Social Worker	124533 107024	Y		

Out of County H	ospital						
- 20 21 20 31, 1.							
Program Name: BHC Sierra Vista Hospital Type of Program: MH Address: 8001 Bruceville Road City: Sacramento, CA 95823		Program Desc Inpatient Hosp	cription: Children's & Adult General & ital.	Specialized Mental Health Sei	rvices.		
Phone Number: (916) 423-2000		Populations s	served: All Ages				
			ties: Interpreter Services available for	language other than English			
Non-English Lang	uages:	Office Hours:	•	gg			
		website: www.	sierravistahospital.com				
Last Name	First Name	NPI	Type of License	License #	CC		
Out of County H	ospital	!		-			
	-						
St. Helena Hospital Center for Behavioral Health Type of Program: MH Address: 525 Oregon Street		Program Des	cription: Inpatient Hospital				
City: Vallejo, CA 9 Phone Number: (7		Populations s	served: All Ages				
□ &	01) 040 2200	Cultural Abilit					
Non-English Lang	uages:	Office Hours:					
	· ·	website: www.	website: www.adventisthealth.org				
Last Name	First Name	NPI	Type of License	License #	CC		
Out of County H	ospital	•	•	•	•		
	•	I Program Des	cription: Inpatient Hospital				
Type of Program: Address: 2740 Gra City: Concord, CA	ant Street						
Phone Number: (9		Populations s	served: All Ages				
스 夫	,	Cultural Abilit	-				
Non-English Lang	uages:	Office Hours:	****				
	Ü		johnmuirhealth.com				
Last Name	First Name	NPI	Type of License	License #	CC		
Out of County H	ospital	•		•			
Program Name: S		Program Desc Inpatient Hosp	cription: Children's & Adult General & ital.	& Specialized Mental Health Sei	rvices.		
Type of Program: Address: 7700 Fo City: Sacramento,	lsom Boulevard						

Phone Number: (9	710,000 00 10	Populations served: All Ages Cultural Abilities: Interpreter Services available for language other than English					
Non-English Languages:		Cultural Abilities: Interpreter Services available for language other than English Office Hours: 24 HOURS website: www.suttermedicalcenter.org					
Last Name	First Name	INFI	Type of License	License #			
Out of County H	10Spitai		1		T		
Dragram Namer	Frament Hearital	Drogram Doogs	ntian Children's 9 Adult Coneral 9	Charialized Mantal Haalth Co	n dooo		
Program Name.	Fremont Hospital	Inpatient Hospita	ption: Children's & Adult General &	Specialized Merital Health Se	il vices		
		пірацені поѕріта	l.				
Type of Program:							
Address: 39001 S							
City: Fremont, CA		Danulet's	arada All Assas				
Phone Number: (5	010)/96-1100	Populations ser	<u> </u>				
ો દે Non English Long		Cultural Abilities					
Non-English Lang	uages:	Office Hours: 2					
Last Name	First Name	NPI	monthospital.com Type of License	License #	СС		
Aneja	Alka	1619031317	Physician	A112029	Y		
Athwal	Harmohinder	1740298256	Physician	A81841	Y		
Boora	Kamaljeet	1356587711	Physician	102846	N		
Duvvuri	Vikas	1255470480	Physician	A99706	Y		
Fooks	Trevor	1730267535	Physician	G63964	Y		
Harleen	Dyal	1225424327	Physician	A153255	N		
Kahlon	Ravinder	1386741320	Physician	A50823	N		
Kahlon	Vasdeep	1497852446	Physician	A51243	N		
Kaur Waraich	Jaap	1316132285	Physician	G67904	Υ		
Kudaravalli	Padmavathi	1144221953	Physician	A67964	Υ		
Kumar	Pradeep	1023188935	Physician	A52032	N		
Kumar	Deepak	1306257910	Physician	A130068	Υ		
Manjunath	Sudha	1801826797	Physician	A87131	Υ		
Munir	Syed	1790718815	Physician	C55029	Υ		
Nayak	Nanda	1477656262	Physician	A43182	N		
Patel	Falguni	1548414337	Physician	A105594	Υ		
Phillips	Nicholas	1255727293	Physician	A153125	N		
Punia	Surender	1376589663	Physician	A77004	Υ		
Reddy	Divya	1518120211	Physician	A103547	Υ		
Singh	Devindar	1447294624	Physician	A48148	N		
Singh	Sunpreet	1326464462	Physician	A132932	Υ		
Waraich	Bhupinder	1689869547	Physician	A53968	Υ		

Program Name: Dependency Con (CDCC) Type of Program: Address: 620 N. A City: Stockton, CA Phone Number: (3)	unseling Center SUD Aurora St. Suite 1 A 95202	Populations ser Cultural Abilities Transgender Office Hours: M Thursday 8:00 ar	ption: Education & Early Intervention Out nsive Outpatient Youth Services ved: Adult and Youth, Adult Perinatal s: Transitional Age Youth, Adolescents, Vel flonday, Wednesday and Friday 8:00 am - 5 m to 7:00 pm www.sjcbhs.org/GettingHelp.aspx	teran, Lesbian, Bisexual,	
Last Name	First Name	NPI	Type of License	License #	СС
Galiza	Marie	1326742495	SACI	11857	Y
Hicks Jackson Lewandowski	James Selena Carla	1649920497 1386810208 1659078137	SAC II SAC II SAC I	Ci39370723 6675 14329	Y Y Y
Martin	Rebecca Xuan	1447671581 1609159623	SAC II - CCAPP	Aii5305031 8 169310	Y
Nguyen Pelletier	Paul	1578976569	Program Manager - CCAPP	Aii5370031 8	Y
Roberts Sosa	Edelisa Rebecca	1043331671 1770133290	SAC II SAC I	R06090615 44 9622	Y
Sumano	Jennie	1972240794	SAC I	13307	Υ
Vasquez-Grant		1720539158	Program Supervisor- SUDCC	7222	Υ
Program Name: Family Ties Type of Program: SUD Address: 7178 S. Recovery Road City: French Camp, CA 95231 Phone Number: (209) 468-6208 Delta Non-English Languages: Spanish		Populations ser Cultural Abilities Office Hours: 24			ler .
			www.sjcbhs.org/GettingHelp.aspx	I.,	
Last Name	First Name	NPI	Type of License	License #	CC
Cheatham	Lavern	1427576545	SAC I	NA	Υ
Cunningham Eriksen	Robin Brittani	1154951242 1518408160	Certification Cerification	10568 12012	Y

Garcia Maldo	naddEvelyn	1962183426	NA	NA	Υ
Gomez	Rosemary	1699898676	SAC II	C17481214	Υ
Graff	Robert	1366560112	Physician	G707479	Υ
Hamilton	Latressa	1336821156	NA	NA	Υ
Perez	Elizabeth	1164802277	SAC I	NA	Υ
Rimmer	Jo	1316617541	SAC II	Ci32940521	Υ
Russell	Stacy	1639622566	Certification	6991	Υ
Satake	Irene	1578151817	Registration	11463	Υ
Williams	Joseph	1326800673	SAW	NA	Υ
D 1	<u> </u>	D D :	(

Program Name: Recovery House

Type of Program: SUD

Address: 7233 S. Delivery Rd City: French Camp, Ca 95231 Phone Number: (209)468-6857 **Program Description:** Inpatient Treatment Assessments

Populations served: Adult

Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexual, Transgender

۵Ł

Non-English Languages: Spanish

Office Hours: 24 HOURS

1295564474

1710639398

1679715767

NPI CC Type of License License # **First Name** Last Name Licensed Marriage and Family Therapist/ 13351/137 Licensed Clinical Professional Counselor Baker Ashley 1225640535 50 Berdahl Michelle 1407070331 Program Manager, CADTP 7937 Υ Boyd Richard 1407467400 SAC II, CCAPP Ci36601022 Υ Charles 1982389649 SAW, CADTP 15776 Moises Graff Robert 1366560112 Physician G707479 Υ RH0005020 720 1629625348 Program Supervisor, CCAPP Graves Dawn Hall 1235648593 SAC I, CADTP 11991 Υ Marc Harton Antwan 1346721701 SAC I, CADTP 11987 Υ Hedrick 1043699333 RN, Ca. State Board of Nursing Kathrine 683243 Υ 1205305968 Ci34081021 Michael SAC II, CCAPP Latorraca Υ 1073098307 SAC II, CADTP 9855 Peterson Martin Rambo Chelsea 19526830 Clinician III LCSW76935 1215586607 SAW 11985 Ramirez George

CADTP SUDRC

SAC II, CADTP

SAC II, CADTP

17202

15667

8312

Υ

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

Rodriguez

Vaccarezza

Scott

Yvonne

William

Lisa

Valenzuela	Augustine	1831809383	SAW , CADTP	14078	Υ				
Vaughn	Ginger	1619444700	SAC II, CADTP	8715	Υ				
	<u> </u>		,	R15693707					
Wulsin	Patrick	1154150407	CCAPP RADT	24	Υ				
Young	Michael	1659778629	Program Supervisor	175499	Υ				
Program Name	: Redwood Family	Program Descri	ption: Residential Substance Use Disorder service	es including: Intal	ке,				
Treatment Cent	ter	assessments, tre	atment planning, individual and group counseling,	collateral, case					
Type of Program: SUD Address: 416 Corson Ave City: Modesto, CA 95350-5408			management, crisis intervention, patient education, safeguarding medication and						
		· ·	d discharge services. Individual and family therapy						
		Education on ber	nefits of MAT and referral to treatment as necessar	Ŋ.					
		Populations ser	ved: Women 18 & older; Children 0-12 for girls and	d 0-10 for boys					
<u>△</u> &		Cultural Abilities	s: Women's Needs						
Non-English Lar	nguages:	Office Hours: 24	hours a day / 7 days a week						
		website: www.red	dwoodfamilycenter.org						
Last Name	First Name	NPI	Type of License	License #	CC				
Amador	Delia	1417455775	CCAPP Registered	Ci40100923	Υ				
Berkowitz	Steve	1205955671	Licensed Marriage and Family Therapist	77643	Υ				
				R12882201					
Carvaeo	Felicia	1659870368	RADT I	18					
				R14474810					
Castillo	Krystle	1225796568	RADT I	21					
Cleary	Michelle	1871102947	CCAPP Certified	Ci36651022	Υ				
cica. y		10,11023 .,	Co. II i Co. Cined	R15010903					
Echols	Amberly	1205541984	CCAPP Registered	23	N				
				A06344112					
Gaona	April	1417538299	CCAPP Certified	3	Υ				
Garcia	Dolores	1073155396	RADT I	19					
Gier	Karri	1134839384	CCAPP Registered	22	Υ				
Gorman	Michael	1760585897	Physician	A68098	Υ				
				SUDRC					
King	Justus	1326813395	CADTP Registered	#17339	Ν				
				A04445051					
McDowell	Paula	1528576196	CADC II	7	Υ				
<u></u>				R15060052					
Mejia	Erica	1386335024	CCAPP Registered	3	Υ				
Myers	Laura	1386152593	CADC I	C12691214					
Nelson	Beth	1912548033	CADCI	C21131214	Υ				
			3.25.	R14569202	•				
Nunez	Veronica	1235899303	RADT I	2					

				R15473302	
Oliveira	Mackensey	1962265041	CCAPP Registered	24	N
				R13399703	
Prather	Laci	1154963916	RADT I	19	
				R14657304	
Tyler	Kayla	1427793413	RADT I	22	
				R14696605	
Zapien	Felicia	1386377844	RADT I	22	

NARCOTIC TREATMENT PROGRAMS/MEDICATION ASSISTED TREATMENT

Program Name: Aegis Treatment Center Stockton LS

Center Stockton LS

Type of Program: **SUD**Address: 8626 North Lower Sacramento

Road, Suite 41

City: Stockton, CA 95210-3747 Phone Number: (209) 478-2487

△ &

Non-English Languages: Spanish

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

Populations served: Adult and Adult Perinatal

Cultural Abilities: Adults, Older Adults, Veterans, Lesbian, Gay, Bisexual

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

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

		website: https://pinnacletreatment.com/locations/				
Last Name	First Name	NPI	Type of License	License #	CC	
Assusada	Maria			R14570202		
Acevedo	Maria	1447903679	CCAPP	22	Υ	
A -1-	D'ala a al			Aii0523002		
Ayala	Richard	1174746044	CCAPP	18	Υ	
Camacho	Nancy	1679024632	CADC-CAS	C14831214	Υ	
Coronado	Kainasse	1427709922	Licensed Vocational Nurse	738965	Υ	
Estrada	Louis	1265217244	CADTP	15538	Υ	
				SUDRC		
Flores	Ricky	1649003401	CADTP	18738	Υ	
Garcia	Rogelio	1811684749	Psychiatric Technician	42509	Υ	
				SUDCC		
Gonzales	Esperanza	1003421314	CADTP	9963	Υ	
Hamilton	Robert	1659791101	Physician	A154190	Υ	
Kourm	Savan	1215067228	CADTP	6568	Υ	
Magana	Sylvia	1518651389	Licensed Vocational Nurse	729572	Υ	
Morones	Carisa	1104360379	Licensed Vocational Nurse	290357	Υ	
Oakes	Marya	1912978263	Family Nurse Practitioner	NPF15701	Υ	
Williams	Ted	1194954123	CAS	SUDCC6303	Υ	
				MY884006		
Yanos	Cyrus	1073378113	Nurse Practitioner	0		

Type of Program: Address: 1839 S. City: Stockton, CA Phone Number: (2 ム よ	El Dorado St. A 95206 209) 463-0872	Cultural Abilities	ved: Adult and Adult Perinatal s: Adults/Older Adult, Veterans, Lesbian, (Gay, Bisexual, Transgen	der	
△ & . `	,	Cultural Abilities	s: Adults/Older Adult, Veterans, Lesbian, 0	Gay, Bisexual, Transgen	der	
	guages: Spanish			Gay, Bisexual, Transgen	der	
Non-English Lang	guages: Spanish	Office Hours: M				
			onday - Friday 5am - 1pm Saturday, Sund	day, and Holidays 7am -	11am	
		website: https://p	innacletreatment.com/locations/			
Last Name	First Name	NPI	Type of License	License #	СС	
Antolin	Rochelle	1447748520	SUDRC	7706	Υ	
				CiCA02261		
Beck	Victoria	1730470295	CADCI	119	Υ	
Crawford	Sarah	1063700540	SUDCC	7266	Υ	
				C03545091		
Galli	Andrew	1740647361	CADC	5	Υ	
				R14266804		
Gilbreath	Michelle	1639750813	RADT	21	Υ	
Hamilton	Robert	1386693547	Physician	G48570	Υ	
Johnson	P. Curly	1235770165	Nurse Practitioner	95012302	Υ	
	·			R12901402		
Jones	Kent	1588129993	RADT	18	Υ	
Lu	Divina	1316001381	Licensed Vocational Nurse	183039	Υ	
				R14272704		
Negrete	Dolores	1447832464	RADT	21	Υ	
Nguyen	Linda	1558886507	SUDRC	8051	Υ	
Palafox	Divina	1912061995	Licensed Vocational Nurse	17300	Υ	
				C05037011		
Pelletier	Steve	1750652483	CADC	8	Υ	
Sandavol	Monique	1396514584	CADTP	17283	Υ	
Talleur	Brian	1659791101	Physician	A154190	Υ	
Williams	Ginned	1942363585	SUDCCII	6030	Υ	
Williams	Trisha	141749339	CADTP	6480	Υ	
Yanos	Cyrus	1073378113	Nurse Practitioner	95028745	Υ	
Program Name: A Centers Californ	Aegis Treatment ia Street		ption: Medically Supervised Methadone NoteTreatment (OTP) Medication Assisted Tre		n	
Type of Program: SUD Address: 1947 North California St, City: Stockton, CA 95210-3747						
Phone Number: (2		Populations served: Adult and Adult Perinatal				

			s: Adults/Older Adult, Veterans, Lesbian, Gay	· · · · · · · · · · · · · · · · · · ·			
Non-English Lar	iguages: Spanish	Office Hours: M	onday - Friday 5am - 1pm Saturday, Sunday	, and Holidays 7am -	11am		
		website: https://pinnacletreatment.com/locations/					
Last Name	First Name	NPI	Type of License	License #	CC		
Bellomo	Sebastian	1063299444	REGISTERED COUNSELOR	15771	Υ		
Cano	Jacqueline	1871149757	Licensed Vocational Nurse	238131	Υ		
				R14596003			
Contreras	Liliana	1376299214	RADT	22	Υ		
				R13969607			
Coronado	Charlotte	1851044069	RADT	20	Υ		
Ford	Leigh	1790741197	Nurse Practitioner	5493	Υ		
Gonzalez	Vianey	1336917558	Licensed Vocational Nurse	95204	Υ		
Johnson	Kaelyn	1023824968	Licensed Vocational Nurse	74258	Υ		
				R15594704			
Kaur	Jesmeen	1356065593	RADT	24	Υ		
				R15079105			
Navarrete	Margarita	1942991542	RADT	23	Υ		
Oakes	Mayra	1912978263	Nurse Practitioner	15701	Υ		
Sagarnaga	Cynthia	1295886893	Certified Counselor	11025	Υ		
Talleur	Brian	1659791101	Physician	A154190	Υ		
Velasquez-		4.500.45.44.4		44047	,,		
Rosales	Normita	1609464114	Licensed Psychiatric Technician	41847 10097	Y		
Williams	Wayne : Aegis Treatment	1528552338	Certified Counselor ption: Medically Supervised Methadone Main				
Centers Lodi Type of Program Address: 541 Sc	n SUD outh Ham Lane, Suite B	_	t Treatment (OTP) Medication Assisted Treatm				
City: Lodi, CA 95		Daniel diamana	and Adult and Adult Davingtol				
Phone Number:	(209)224-8490	Populations served: Adult and Adult Perinatal					
Δ &		Cultural Abilities	s: Adults/Older Adult, Veterans, Lesbian, Gay	, Bisexual, Transgeno	der		
Non-English Lar	nguages: Spanish	Office Hours: M	onday - Friday 5:00am - 6:00pm Saturday, S	Sunday, Holidays 7am	- 12		
		pm					
		website: https://p	innacletreatment.com/locations/				
Last Name	First Name	NPI	Type of License	License #	CC		
Campos	John	1407192297	Licensed Vocational Nurse	260740	Υ		
Castro	Julie	1548927544	Licensed Psychiatric Technician	42133	Υ		
	Joseph	1841251105	Physician	G47843	Υ		

			<u> </u>		
				A05132081	
Galvez	John	1487032322	Certified Alcohol and Drug Technician	9	Υ
Garcia	Mark	1962102079	Registered Alcohol and Drug Technician	15103	Υ
Jacinto	Carol	1033327358	S		Υ
Johnson	Alexandria	1407568686			Υ
Patron	Nicolette	1659039758	L659039758 Certified Alcohol and Drug Technician 1		Υ
Perez	Chris 1184194169 Certified Alcohol and Drug Technician		207544 II	Υ	
Preap	Jennifer	1043866627	3866627 Registered Alcohol and Drug Technician 9		Υ
Talleur	Brian	1659791101	01 Physician		Υ
Townsell	Christina	1245053354	Licensed Vocational Nurse and Psych Tech	29535	Υ
Trunnell	Kathryn	1093032559	Certified Alcohol and Drug Technician	6541	Υ
Tun	Suehei	1548673999	Registered Alcohol and Drug Technician	7228	Υ
White	Kimberly	1649459546	Certified Alcohol and Drug Technician	6413	Υ
Program Name: A	egis Treatment	Program Descript	tion: Medically Supervised Methadone Maintenan	ce Detoxificatio	n
Type of Program: Standards: 955 Center City: Manteca, CA Standards Phone Number: (20 △ ♣	er Street Suites 95337		ed: Adult and Adult Perinatal Adults/Older Adult, Veterans, Lesbian, Gay, Bisex	kual, Transgend	ler
Non-English Langu	ages: Spanish		nday - Friday 5:30am - 1pm Saturday, Sunday, H	olidays 8am - 1	1 am
		website: https://pin	nacletreatment.com/locations/		
Last Name	First Name			License #	1 am CC
Last Name Brown	First Name Cenarus	website: https://pin	nacletreatment.com/locations/ Type of License	License #	СС
Last Name	First Name Cenarus Monica	website: https://pin NPI 1639742778	nacletreatment.com/locations/ Type of License SUDRC	License # 12122	CC Y
Last Name Brown Cortez	First Name Cenarus	website: https://pin NPI 1639742778 1316487572	nacletreatment.com/locations/ Type of License SUDRC NA	License # 12122 NA	CC Y Y
Last Name Brown Cortez Danzig	First Name Cenarus Monica Abigail	website: https://pin NPI 1639742778 1316487572 1619790169	nacletreatment.com/locations/ Type of License SUDRC NA RADT	License # 12122 NA R15865411	CC Y Y
Last Name Brown Cortez Danzig Duenas	First Name Cenarus Monica Abigail Cinthia Christina	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC	License # 12122 NA R15865411 13008	CC Y Y Y
Last Name Brown Cortez Danzig Duenas Falcon	First Name Cenarus Monica Abigail Cinthia	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales	First Name Cenarus Monica Abigail Cinthia Christina Katryn	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician	License # 12122 NA R15865411 13008 175628 736533 G48570	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533 G48570 72342	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon Mohr	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa Rebecca	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897 1154898302	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS Licensed Psychiatric Technician	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214 26531	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon Mohr Palacios-Reyes	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa Rebecca Danessa	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897 1154898302 1558081752	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS Licensed Psychiatric Technician Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214 26531 687867	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon Mohr Palacios-Reyes Salas	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa Rebecca Danessa Graciela	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897 1154898302 1558081752 1417602038	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS Licensed Psychiatric Technician Licensed Vocational Nurse Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214 26531 687867 42180	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon Mohr Palacios-Reyes Salas Sandhu	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa Rebecca Danessa Graciela Sukhjit	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897 1154898302 1558081752 1417602038 1629628763	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS Licensed Psychiatric Technician Licensed Vocational Nurse Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214 26531 687867 42180 95012835	СС
Last Name Brown Cortez Danzig Duenas Falcon Gonzales Hamilton Jane Davis Jimenez-Cuevas Kolleh McClendon Mohr Palacios-Reyes Salas Sandhu Sauers	First Name Cenarus Monica Abigail Cinthia Christina Katryn Robert Mary Jennifer Esther Teresa Rebecca Danessa Graciela Sukhjit Elizabeth	website: https://pin NPI 1639742778 1316487572 1619790169 1497401186 1154898393 1750106373 1386693547 1861822744 1336873959 1831915883 1336291897 1154898302 1558081752 1417602038 1629628763 1922877950	nacletreatment.com/locations/ Type of License SUDRC NA RADT SUDRC Licensed Vocational Nurse Licensed Vocational Nurse Physician Licensed Vocational Nurse SUDRC RADT CADC-CAS Licensed Psychiatric Technician Licensed Vocational Nurse Licensed Vocational Nurse Licensed Psychiatric Technician Licensed Vocational Nurse Licensed Psychiatric Technician Nurse Practitioner Licensed Vocational Nurse	License # 12122 NA R15865411 13008 175628 736533 G48570 72342 15506 R158691112 C27861214 26531 687867 42180 95012835 687574	CC

Vang	Down	1336654672	SUDCC II	12547	Υ			
Wilson	Tasha	1801550983	SUDRC II	14302	Υ			
Yohana	Evet	1447964283	SUDRC	16732	Υ			
Program Name: MedMark Treatment		Program Description: Medically Supervised Methadone Maintenance Detoxification						
Center		(OTP) Outpatient Treatment (OTP) Medication Assisted Treatment						
Type of Program	SUD							
Address: 1111 N								
City: Stockton, CA 95202								
Phone Number:		Populations serv	ved: Adult and Adult Perinatal					
۵Ł	,	•	Cultural Abilities: Adults/Older Adult, Veterans, Lesbian, Gay, Bisexual, Transgender					
Non-English Lan	guages: Spanish	Office Hours: M	onday - Friday 5am - 1pm Saturday, Sunda	ay, and Holidays 7am-	-11am			
			edmark.com/medmark-treatment-centers-stoo	•				
Last Name	First Name	NPI	Type of License	License #	СС			
AHERN	DENISE	1093203911	CERTIFIED COUNSELOR	191227	Υ			
ESCLOVON	LACI	1609489731	MEDICAL ASSISTANT	NA	Υ			
GARCIA	BRITTANY	1699394965	CADTP	12372	Υ			
GONZALEZ	ADELITA	1972962488	REGISTERED COUNSELOR	6110	Υ			
HARRIS	DANA	1760995781	CADTP	6203	Υ			
HOLIDAY	BRENDA	1306839352	NURSE PRACTITIONER	15461	Υ			
KOUM	SAVAN	1215067228	CADTP	6568	Υ			
				R14460510				
LABASS	SHELLY	1295489029	CCAPP	21	Υ			
LENADADO	JERRI	1477616910	LICENSED VOCATIONAL NURSE	170115	Υ			
LO	LAWRENCE	1770122384	REGISTERED COUNSELOR	10180	Υ			
PENA	ANNA	1972667236	CADTP	6197	Υ			
SCOTT	MELISSA	1093474512	ССАРР	132186	Υ			
SCOTT	WILLIAM	1710639398	CCAPP	132070	Υ			
WILLIAMS	JAY FRANK	1760049043	CERTIFIED COUNSELOR	2014156	Υ			
WILLIAMS	TRISHA	1417493339	CADTP	6480	Υ			
WILLIAMSON	ERNEST	1649782954	CADTP	6388	Υ			
Program Name: Services	Program Name: Towns Health Services		otion: Intensive Outpatient and Outpatient se	ervices. ASAM level I a	and			
Type of Program	SUD							
, , ,	aans Dr. STE C, D, and							
City: Galt, CA 9								
Phone Number:		Populations served: Adults 18 years of age and older						
۵Ġ	,	Cultural Abilities: All required in addition to Veterans, LGBT, Older Adults						
	guages: Spanish, Farsi	· · · · · · · · · · · · · · · · · · ·						
	5 · 5 · 5 · 5 · 5 · 5 · 6 · 6 · 6 · 6 ·	website:https://townshealthservices.com/						
Last Name	First Name	NPI	Type of License	License #	СС			

Blake	Aledria	4.4.700004.5		R15309810	.,
	7.11041.14	1447022314	RADT	23	Υ
Bocage	Rebecca	1144050600	Desire and the CCADD	R15731082	Υ
		1144050600	Registered with CCAPP	4	Y
Brown	Vanessa	1043900913	RADT	R15065405	Υ
		1043900913	RADI	R14751007	
Castaneda	Iririan	1427783000	CCAPP Registered	22	Υ
Castaneaa		1127703000	CONT. Hegistered	R14750807	
Cobb	Robert	1477288751	RADT	22	Υ
Cross	Kendra	1932775814	CADC1 CS	Ci37340123	Υ
				R14726506	
Cross	Tanisha	1679204291	RADT	22	Υ
				SUDCC 2-	
Delong	Tammi	1972150514	Certified CADPT II Clinical Supervisor	CS-6085	Υ
				R15314810	
Espinoza	Patricia	1801678966	RADT	23	Υ
		4520724240	2427	R15107006	.,
Gaylor	Joseph	1528721248	RADT	23	Υ
Harnden	Christophor	1689441297	RADT	R15387712	Υ
	Christopher			14939	
Huihui-Barker	Stephanie	166598652	SUDRC II		Υ
Laform	Janell	1316777881	Registered with CCAPP	R15732108	Υ
				SUDRC	
Lovan	Andre	1841055936	CDAPT, RADT	17341	Υ
				SUDRC	
Luna	Rhonda	1164243390	Registered CADTP	19017	Υ
				R14385207	
Maxey	Heather	1104498658	RADT	21	Υ
				R15071205	
Perkins	Nathen	1770273641	RADT	23	Υ
Calamaialam	Carraman	4500402227	Danistanad with CCADD	R15708907	V
Schneider	Savannah	1588492227	Registered with CCAPP	24	Y
Towns	Mark	1811183643	Physician/Addiction Specialist	A100676	Υ
Ulm	Mathew	1013402015	CCAPPII	Ci31561220	Υ
				R15103206	
Woodworth	Julia	1699550889	RADT	23	Υ
Program Name: Stockton Circle of Friends Type of Program SUD		Program Descri	ption: Inpatient Residential Treatment		

Address: 3128 E Anita Street City: Stockton, CA 95205-3905 Phone Number: (209)451-0315 Populations served: Adult Male Non-Perinatal △ 5 Cultural Abilities: Veterans, Adults, Older Adults, Gay, Transgender Non-English Languages: Office Hours: 24 Hours website: https://yourfirststep.org/treatment-center/stockton-circle-of-friends-adult-prog-stock Last Name **First Name** NPI Type of License License # C05951111 Campbell **Ernest** 1124390109 SAC I Duvdevany Physician C137556 Neta 1598180341 Michael 1275517617 SACI 5919 Estrada 1730471384 SAC II C19391214 Hatten Stephanie **Program Name: New Directions Program Description: Residential and outpatient** Type of Program SUD Address: 1981 Cherokee Road City: Stockton, CA 95205 Phone Number: (209)850-6500 Populations served: Adult male and female clients **Cultural Abilities:** △ᠳ Non-English Languages: Office Hours: Monday - Friday 8:00 am - 5:00 pm website: www.newdirectionsstockton.org NPI **First Name** Type of License License # **Last Name** CC 1356178438 Abitia Rita CATC 24935 Ν 13974 Apilado Jamie 1356059901 CADTP- Case Worker Υ Benner Dale **Executive Director** Ν Calvin CADTP 20127 Bennet 1831905868 Dixon Jeanette 1063657757 Counselor 8067 Υ CADTP -Case Worker 12191 Υ Gibson James 1841908183 CADTP- Case Worker 14155 Gorrell Roxanne 1467165761 Υ 1265140511 Harper Greta CADTP -Case Worker 14224 Υ Kimberly 16893822566 CADTP - Case Worker 13976 Υ Houser Ibea Raquel 1255054276 Case Worker 13037 Υ Jazulin Steve **Program Director** Ν King Ruby 1972177665 Counselor 8062 Υ Liberty Leslie 1427649318 LPHA/LSCW 17173 Υ Counselor Υ Limas Richard 1518630953 7346 1639743974 7267 Matas James Counselor Associate Marriage Family Therapist/ Aii0632801 Kathy Counselor 22 Mero 1316069495 1063086197 SUD Counselor 9469 Newton Deborah Poirier-Brode Karen 1144246547 Physician A26767 Υ Debra 1124692991 **SUD Counselor** 8618 Υ Rice

CADTP - Case Worker

14223

Ethan

1659089902

Rico

Schopp	Diane	1457925091	SUD Counselor	9781	Υ
Sexton	Timothy	1407529886	SUD Counselor	9517	Υ
Shelton	Tiffany	1891471777	CADTP-SUD Case Worker	15344	Υ
Smith	Denise	1932773579	SUD Counselor	7568	Υ
	Challa			RH0011480	
Tillman	Stella	NA	CCAPP	923	Υ
Vega	Jocelyn	1386357739	CADTP - Case Worker	14271	Υ
Ybanez	Elodia	1114606449	SUD CADTP	NA	Υ