

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALLERGY & IMMUNOLOGY

BOREN,ERIC J - 250537

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1921 18TH ST, BAKERSFIELD, CA 93301 | (661) 327-9693 | (661) 327-0749 |
| OFFICE 2 | 1429 MAIN ST, DELANO, CA 93215 | (661) 721-8832 | (661) 721-8319 |
| OFFICE 3 | 443 W MORTON AVE STE A, PORTERVILLE, CA 93257-3352 | (559) 782-8578 | (559) 782-8594 |

KITT,SEE-RUERN S - 250162

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2323 16TH ST STE 108, BAKERSFIELD, CA 93301 | (661) 325-2448 | (661) 325-7425 |

TANUS,TONNY - 250538

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1921 18TH ST, BAKERSFIELD, CA 93301 | (661) 327-9693 | (661) 327-0749 |
| OFFICE 2 | 1429 MAIN ST, DELANO, CA 93215 | (661) 721-8832 | (661) 721-8319 |
| OFFICE 3 | 443 W MORTON AVE STE A, PORTERVILLE, CA 93257-3352 | (559) 782-8578 | (559) 782-8594 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

ANESTHESIOLOGY

PACIFIC PAIN PHYSICIANS - 820291

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2901 SILLECT AVE STE 200, BAKERSFIELD, CA 93308 | (661) 401-6150 | (805) 563-0364 |

PAIN INSTITUTE OF CALIFORNIA,ROBERT MICHAEL - 820292

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9802 STOCKDALE HWY STE 105, BAKERSFIELD, CA 93311 | (661) 665-7880 | (661) 665-7811 |

AUDIOLOGY

ANDERSEN,DOUGLAS E - 250302

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1801 21ST ST, BAKERSFIELD, CA 93301 | (661) 324-2113 | (661) 324-2891 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

CARDIAC ELECTROPHYSIOLOGY

HABIB, MOKSEDUL - 250359

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| BENGALI | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 631-5544 | (661) 631-5546 |

NAIR, SHYAM K - 250144

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|-------------------------------------|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2007 17TH ST, BAKERSFIELD, CA 93301 | (661) 633-1983 | (661) 633-1101 |

NALOS, PETER C - 250553

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308 | (661) 323-8384 | (661) 323-9326 |

SALVO, JARED M - 250051

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 500 OLD RIVER RD STE 260, BAKERSFIELD, CA 93311 | (661) 843-6464 | (611) 282-8417 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SINGH,GURJIT - 250433

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| PUNJABI | | | | |
| HINDI | OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |

CARDIOVASCULAR DISEASES
AGGARWAL,ATUL A - 250095

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 1018 CALLOWAY DR, BAKERSFIELD, CA 93312 | (661) 664-0100 | (661) 664-0111 |

AGGARWAL,ATUL A - 250583

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| HINDI | | | | |
| PUNJABI | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |

BANERJEE,SUPRATIM - 250357

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| BENGALI | | | | |
| HINDI | OFFICE 1 | 432 LEXINGTON ST BLDG B, DELANO, CA 93215 | (661) 725-7818 | (661) 725-3484 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BARDIA, NIKKY - 251070

Group Affiliation: CENTRIC HEALTH

Language(s):

GUJARATI

Office #

Street:

Phone:

Fax:

HINDI

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

100 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311

(661) 323-8384

(661) 323-9326

BHAMBI, BRIJESH K - 250549

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

20211 W VALLEY BLVD, TEHACHAPI, CA 93561

(800) 432-7824

(661) 323-9326

DEITS, RICHARD M - 250077

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

3838 SAN DIMAS ST STE B201, BAKERSFIELD, CA 93301

(661) 321-3161

(661) 321-3166

DESAI, CHIRAG KIRIT - 251071

Group Affiliation: CENTRIC HEALTH

Language(s):

SPANISH

Office #

Street:

Phone:

Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

100 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311

(661) 323-8384

(661) 323-9326

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DESAI,KIRIT R - 250550

Group Affiliation:

Language(s):

SINHALESE

Office #
Street:
Phone:
Fax:

SPANISH

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

3402 MT PINOS WAY, FRAZIER PARK, CA 93225

(661) 716-4754

(661) 325-1202

OFFICE 3

100 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311

(661) 323-8384

(661) 323-9326

GHANDFOROUSH,ASLAN G - 250358

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

5945 TRUXTUN AVE, BAKERSFIELD, CA 93309

(661) 631-5544

(661) 631-5546

OFFICE 1

5945 TRUXTUN AVE, BAKERSFIELD, CA 93309

(661) 631-5544

(661) 631-5546

GOWD,PAMPANA - 250552

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

100 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311

(661) 323-8384

(661) 323-9326

GUPTA,NEELSH - 251072

Group Affiliation: CENTRIC HEALTH

Language(s):

HINDI

Office #
Street:
Phone:
Fax:

OFFICE 1

2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308

(661) 323-8384

(661) 323-9326

OFFICE 2

1205 GARCES HWY STE 203, DELANO, CA 93215

(661) 323-8384

(661) 323-9326

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HABIB,MOKSEDUL - 250359

Group Affiliation:

Language(s):

| BENGALI | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 631-5544 | (661) 631-5546 |

KHAN,NASSER U - 250360

Group Affiliation:

Language(s):

| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 631-5544 | (661) 631-5546 |
| HINDI | OFFICE 2 | 20041 W VALLEY BLVD UNI, TEHACHAPI, CA 93561 | (661) 823-8604 | (661) 823-7638 |

KYAW,HTOO - 250096

Group Affiliation:

Language(s):

| BURMESE | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| | OFFICE 1 | 1018 CALLOWAY DR, BAKERSFIELD, CA 93312 | (661) 664-0100 | (661) 664-0111 |
| | OFFICE 1 | 1018 CALLOWAY DR, BAKERSFIELD, CA 93312 | (661) 664-0100 | (661) 664-0111 |

KYAW,HTOO - 250949

Group Affiliation:

Language(s):

| BURMESE | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| | OFFICE 1 | 625 34TH ST SUITE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |
| | OFFICE 1 | 625 34TH ST SUITE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MEHTA,VIRAL Y - 250361

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|----------|----------|---|----------------|----------------|
| HINDI | | | | |
| GUJARATI | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 631-5544 | (661) 631-5546 |
| | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 631-5544 | (661) 631-5546 |
| | OFFICE 2 | 432 LEXINGTON ST BLD, DELANO, CA 93215 | (661) 725-7818 | (661) 725-3484 |
| | OFFICE 2 | 432 LEXINGTON ST BLD, DELANO, CA 93215 | (661) 725-7818 | (661) 725-3484 |

NAIR,SHYAM K - 250144

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 2007 17TH ST, BAKERSFIELD, CA 93301 | (661) 633-1983 | (661) 633-1101 |

NAJJAR,EMAD S - 250362

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 323-4278 | (661) 631-5546 |
| OFFICE 2 | 432-B LEXINGTON AVE, DELANO, CA 93215 | (661) 323-4278 | (661) 631-5546 |
| OFFICE 3 | 20041 W VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 323-4278 | (661) 631-5546 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NALOS,PETER C - 250553

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308 | (661) 323-8384 | (661) 323-9326 |

PATEL,AJAY M - 250430

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 2 | 20211 WEST VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 2 | 20211 WEST VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 443-0088 | (661) 443-0087 |

PUGA,LEOPOLDO - 250431

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 2 | 20211 WEST VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 443-0088 | (661) 443-0087 |
| OFFICE 2 | 20211 WEST VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 443-0088 | (661) 443-0087 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SALVO,JARED M - 250051

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 500 OLD RIVER RD STE 260, BAKERSFIELD, CA 93311 | (661) 843-6464 | (611) 282-8417 |

SANDHU,RASHAM DS - 250432

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| PUNJABI | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 8337 BRIMHALL RD BLDG 1200, BAKERSFIELD, CA 93312 | (661) 443-0088 | (661) 443-0087 |
| | OFFICE 2 | 20211 WEST VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 443-0088 | (661) 443-0087 |

SHARMA,SANJIV - 250554

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308 | (661) 323-8384 | (661) 323-9326 |

SINGH,SARABJEET - 250556

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308 | (661) 323-8384 | (661) 323-9326 |
| | OFFICE 1 | 2901 SILLECT AVE STE 100, BAKERSFIELD, CA 93308 | (661) 323-8384 | (661) 323-9326 |

SINGH,SARABJIT K - 250344

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| PUNJABI | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 4000 PHYSICIANS BLVD STE E101, BAKERSFIELD, CA 93301 | (661) 327-0807 | (661) 327-7593 |
| | OFFICE 1 | 4000 PHYSICIANS BLVD STE E101, BAKERSFIELD, CA 93301 | (661) 327-0807 | (661) 327-7593 |

THAIK,CYNTHIA M - 251007

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|--|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 4000 PHYSICIANS BLVD BLDG E STE 101, BAKERSFIELD, CA 93301 | (661) 327-0807 | (661) 327-7593 |

THAYAPRAN,NALLATHAMBY - 250363

Group Affiliation:

Language(s):

| | | | | |
|-------|-----------------|---|----------------|----------------|
| TAMIL | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 5945 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 323-4278 | (661) 631-5546 |

CARDIOVASCULAR SURGERY

**ALPUERTO,ALDRIN CHRISTIAN PRESBITERO -
250932**

Group Affiliation:

Language(s):

| | | | | |
|--------------|-----------------|--|----------------|----------------|
| UNDETERMINED | Office # | Street: | Phone: | Fax: |
| TAGALOG | OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301-2286 | (661) 327-8538 | (661) 327-5432 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PAW,PATRICK T - 250083

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| THAI | | | | |
| CHINESE | OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |
| | OFFICE 2 | 3838 SAN DIMAS ST STE B 201, BAKERSFIELD, CA 93301-1496 | (661) 321-3161 | (661) 321-3166 |

PECK,ERIC A - 250084

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |

CHIROPRACTIC

SALYERS,STEVEN C - 250543

Group Affiliation: ADVANCED CHIROPRACTIC

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|--|----------------|----------------|
| | OFFICE 1 | 5251 OFFICE PARK DR STE 120, BAKERSFIELD, CA 93309 | (661) 327-7074 | (661) 327-0614 |

COLON & RECTAL SURGERY

MALELLARI,LORENC - 250081

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301 | (661) 665-0505 | (661) 864-2190 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CRITICAL CARE (INTENSIVIST)

ASHRAF-ALIM, MUHAMMAD - 250013

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| HINDI | | | | |
| PUNJABI | OFFICE 1 | 3008 SILLECT AVE STE 140, BAKERSFIELD, CA 93308 | (661) 377-0091 | (661) 377-1715 |

CHANDRASEKHAR, JAYARAMAN - 250025

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-------|----------|--|----------------|----------------|
| HINDI | | | | |
| TAMIL | OFFICE 1 | 6001 TRUXTUN AVE STE 120A, BAKERSFIELD, CA 93309 | (661) 327-1352 | (661) 704-4238 |

VAGHASIA, PRAMIL B - 250385

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|----------|----------|--|----------------|----------------|
| SPANISH | | | | |
| GUJARATI | OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | | (661) 695-6767 |
| | OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-6910 | |

DERMATOLOGY

AWADALLA, FARAH C - 250017

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|--|----------------|----------------|
| | OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93309 | (661) 322-2700 | (661) 427-4587 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93309 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 2 | 300 OLD RIVER RD STE, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 2 | 300 OLD RIVER RD STE, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 1317 MAIN ST STE B, DELANO, CA 93215 | (661) 430-9070 | (661) 430-9078 |
| OFFICE 3 | 1317 MAIN ST STE B, DELANO, CA 93215 | (661) 430-9070 | (661) 430-9078 |
| OFFICE 4 | 1200 N CHINA LAKE BLVD STE A, RIDGECREST, CA 93555 | (760) 446-9007 | (760) 446-6900 |
| OFFICE 4 | 1200 N CHINA LAKE BLVD STE A, RIDGECREST, CA 93555 | (760) 446-9007 | (760) 446-6900 |

CABRAL,ERIK S - 250018

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 276 S MILL ST STE B & C, TEHACHAPI, CA 93561 | (661) 388-5240 | (661) 266-8751 |
| OFFICE 2 | 1317 MAIN ST STE, DELANO, CA 93215 | (661) 430-9070 | (661) 430-9075 |
| OFFICE 3 | 876 W GRAND AVE, PORTERVILLE, CA 93257 | (951) 412-1540 | (951) 412-1541 |

CARDENAS,ANA A - 250135

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3400 CALLOWAY DR STE 200, BAKERSFIELD, CA 93312 | (661) 410-7546 | (661) 410-7547 |

DRAYER,JEFFREY A - 250019

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4585 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 876 W GRAND AVE, PORTERVILLE, CA 93257 (951) 412-1540 (951) 412-1541

ELERYAN,MISTY - 251011

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93305 | (661) 322-2700 | (661) 427-4585 |
| OFFICE 2 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8505 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4585 |

EZRA,NAVID - 251034

Group Affiliation: CALIFORNIA DERMATOLOGY INSTITUTE PC

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1300 N VENTURA RD, OXNARD, CA 93030 | (888) 367-1850 | (805) 222-0323 |

FERNANDEZ,GEOVER - 250305

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 633-3669 |

FERNANDEZ,GEOVER - 251094

Group Affiliation: DERMATOLOGY INTITUTE FOR SKIN CANCER

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6401 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KURSHENBAUM, HOWARD - 251019

Group Affiliation: LA LASER CENTER PC CALIFORNIA PROFESSI

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93305 | (661) 322-2700 | (661) 427-4585 |
| OFFICE 2 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4585 |

LUX DERMATOLOGY - 251096

Group Affiliation: LUX DERMATOLOGY

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9500 STOCKDALE HIGHWAY STE 101, BAKERSFIELD, CA 93311 | (661) 541-2017 | (661) 535-2521 |

MEHDI, RAZA - 250020

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 2 | 5600 CALIFORNIA AVE STE, BAKERSFIELD, CA 93309 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 4 | 876 W GRAND AVE, PORTERVILLE, CA 93257 | (951) 412-1540 | (951) 412-1541 |

RASKIN, BERNARD I - 250146

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4100 EMPIRE DR STE 120 & 140, BAKERSFIELD, CA 93309 | (866) 903-3376 | (661) 624-0111 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 28212 KELLY JOHNSON PKWY #245, SANTA CLARITA, CA 91355 (661) 254-3686 (661) 254-5671

TAHERI, DANIEL P - 250022

Group Affiliation: LA LASER CENTER

Language(s):

FARSI

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93305 | (661) 322-2700 | (661) 200-9141 |
| OFFICE 2 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 1317 MAIN ST STE B, DELANO, CA 93215 | (661) 430-9070 | (661) 430-9078 |
| OFFICE 4 | 1200 N CHINA LAKE BLVD STE A, RIDGECREST, CA 93555 | (760) 446-9007 | (661) 200-9141 |
| OFFICE 5 | 400 N IRWIN ST STE 101, HANFORD, CA 93230 | (559) 584-2700 | (559) 415-7199 |
| OFFICE 6 | 6181 N THESTA AVE STE 104, FRESNO, CA 93710 | (559) 825-0300 | (559) 825-0301 |
| OFFICE 7 | 144 S L ST, TULARE, CA 93274 | (559) 890-3150 | (559) 890-3160 |

WINKELMANN, RICHARD R - 250023

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93309 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 2 | 300 OLD RIVER RD STE, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 4 | 876 W GRAND AVE, PORTERVILLE, CA 93257 | (951) 412-1540 | (951) 412-1541 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

DIABETIC MEDICINE

DUGGAL,JASLEEN K - 250551

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3008 SILLECT AVE STE 220, BAKERSFIELD, CA 93308 | (661) 748-1999 | (661) 748-1815 |

ETTINGER,VICTOR G - 250572

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4300 BIRCH AVE, LAKE ISABELLA, CA 93240 | (760) 379-1791 | (760) 379-1793 |

SHAH,HARSHIT R - 250087

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9500 STOCKDALE HWY STE 201, BAKERSFIELD, CA 93311 | (661) 327-1431 | (661) 321-3286 |

SINGH,ATAM B - 250555

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3008 SILLECT AVE STE 220, BAKERSFIELD, CA 93308 | (661) 748-1999 | (661) 748-1815 |
| OFFICE 2 | 4531 BUENA VISTA RD STE, BAKERSFIELD, CA 93311 | (661) 748-1999 | (661) 748-1815 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

EMERGENCY MEDICINE

GARCIA, JAIRO - 250953

Group Affiliation: PINNACLE EMERGENCY PHYSICIANS OF BAKERSF

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (626) 447-0296 | (626) 447-6057 |

ENDOCRINOLOGY

DUGGAL, JASLEEN K - 250551

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3008 SILLECT AVE STE 220, BAKERSFIELD, CA 93308 | (661) 748-1999 | (661) 748-1815 |

ETTINGER, VICTOR G - 250572

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4300 BIRCH AVE, LAKE ISABELLA, CA 93240 | (760) 379-1791 | (760) 379-1793 |

HAN, SANG HUN - 250496

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

SHAH,HARSHIT R - 250087

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9500 STOCKDALE HWY STE 201, BAKERSFIELD, CA 93311 | (661) 327-1431 | (661) 321-3286 |

SINGH,ATAM B - 250555

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3008 SILLECT AVE STE 220, BAKERSFIELD, CA 93308 | (661) 748-1999 | (661) 748-1815 |
| OFFICE 2 | 4531 BUENA VISTA RD STE, BAKERSFIELD, CA 93311 | (661) 748-1999 | (661) 748-1815 |

SINGH,SUKHMANI KAUR - 251093

Group Affiliation: DIGNITY HEALTH MEDICAL GROUP

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE B 231, BAKERSFIELD, CA 93301-1494 | (661) 665-0505 | (661) 327-5432 |

YADAV,PAVAN - 251014

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-----------------------------------|----------------|----------------|
| OFFICE 1 | 12560 BORON AVE, BORON , CA 93516 | (661) 874-4050 | (866) 572-7851 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

FAMILY PLANNING

FAMILY PLANNING ASSOC. MED GROUP - 820057 Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 2500 H ST, BAKERSFIELD, CA 93301 | (661) 633-5266 | (909) 494-7549 |
| OFFICE 2 | 1068 N CHERRY ST, TULARE, CA 93274 | (559) 233-0990 | (909) 495-1495 |

GASTROENTEROLOGY

BHAIKA,HARPAL S - 250348 Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5959 TRUXTUN AVE STE 200, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 324-3195 |

BHOGAL,NEIL SINGH - 250349 Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5959 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 716-6630 |

BHOGAL,RABINDER S - 250350 Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5959 TRUXTUN AVE STE 200, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 324-3195 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

CHOWDHURY,TABASSUM A - 250351

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| HINDI | | | | |
| SPANISH | OFFICE 1 | 5959 TRUXTUN AVE STE 100, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 324-3195 |

KALHA,ISHAAN S - 250352

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| PUNJABI | | | | |
| HINDI | OFFICE 1 | 5959 TRUXTUN AVE STE 200, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 716-6630 |
| | OFFICE 2 | 1519 GARCES HWY STE, DELANO, CA 93215 | (661) 324-1203 | (661) 324-3195 |

KRISHAN,RAJEEV - 250011

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 9900 STOCKDALE HWY STE 208, BAKERSFIELD, CA 93311 | (661) 735-3915 | (661) 367-9533 |

MANU,RAJEEV R - 250342

Group Affiliation: RAJEEV R. MANU MD INC

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 9870 BRIMHALL RD STE 100, BAKERSFIELD, CA 93312 | (661) 587-7611 | (661) 587-7612 |

MATUK,ROBIN A - 250353

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | Office # | Street: | Phone: | Fax: |
|---|----------|---|----------------|----------------|
| | OFFICE 1 | 5959 TRUXTUN AVE STE 200, BAKERSFIELD, CA 93309 | (661) 324-1203 | (661) 324-3195 |
| PERUMALSAMY,KUMARAVEL S - 250403 | | Group Affiliation: | | |
| Language(s): | | | | |
| TAMIL | | | | |
| | OFFICE 1 | 1331 W AVE J STE 202, LANCASTER, CA 93534 | (661) 529-7550 | (661) 529-7560 |
| | OFFICE 2 | 900 HERITAGE BLVD BLD, RIDGECREST, CA 93555 | (661) 529-7550 | (661) 529-7560 |
| | OFFICE 3 | 20211 VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 529-7550 | (661) 529-7560 |
| RAHAL,HARMAN KAUR - 250940 | | Group Affiliation: | | |
| Language(s): | | | | |
| HINDI | | | | |
| PUNJABI | | | | |
| | OFFICE 1 | 9802 STOCKDALE HWY STE 102, BAKERSFIELD, CA 93311 | (661) 323-1200 | (661) 323-1204 |
| | OFFICE 2 | 1205 GARCES HWY STE 101, DELANO, CA 93215 | (661) 721-1200 | (661) 721-1204 |
| RAHAL,PARAMVIR S - 250374 | | Group Affiliation: | | |
| Language(s): | | | | |
| SPANISH | | | | |
| PUNJABI | | | | |
| | OFFICE 1 | 9802 STOCKDALE HWY STE 102, BAKERSFIELD, CA 93311 | (661) 323-1200 | (661) 323-1204 |
| | OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 721-1200 | (661) 721-1204 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

RAVI,NANDAKUMAR BORAI AH - 251078

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9870 BRIMHALL RD STE 100, BAKERSFIELD, CA 93312 | (661) 588-8725 | (661) 588-8749 |
| OFFICE 2 | 20041 VALLEY BLVD STE 3, TEHACHAPI, CA 93561 | (661) 822-0377 | (661) 637-1006 |

TYAGI,VIVA IK - 250404

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 43944 15TH ST W STE 201, LANCASTER, CA 93534 | (661) 529-7550 | (661) 529-7560 |
| OFFICE 2 | 900 HERITAGE BLVD BLD, RIDGECREST, CA 93555 | (661) 529-7550 | (661) 529-7560 |
| OFFICE 3 | 20211 VALLEY BLVD, TEHACHAPI, CA 93561 | (661) 529-7550 | (661) 529-7560 |

GENERAL PREVENTATIVE MEDICINE

SAFWATULLAH,MUHAMMAD - 250959

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 301 BRUNDAGE LN, BAKERSFIELD, CA 93304 | (661) 323-6086 | (661) 324-6301 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

GENERAL SURGERY

BECK,TIM NICO - 250935

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301-2286 | (661) 327-8538 | (661) 327-5432 |

BISHOP,KELLY T - 250286

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1201 JEFFERSON ST, DELANO, CA 93215 | (661) 721-0737 | (661) 721-0738 |

BUXTON,JOHN A - 250571

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4300 BIRCH AVE, LAKE ISABELLA, CA 93240 | (760) 379-1791 | (760) 379-1793 |

BUXTON,JOHN A - 250075

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 2521 G ST, BAKERSFIELD, CA 93301 | (661) 327-2544 | (661) 327-0555 |
| OFFICE 2 | 3838 SAN DIMAS ST BLD, BAKERSFIELD, CA 93301 | (661) 327-2544 | (661) 327-0555 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

CHERIYAN,JERRY - 250960

Group Affiliation: KERN SURGICAL ASSOCIATES

Language(s):

MALAYALAM

Office #
Street:
Phone:
Fax:

OFFICE 1

4000 STOCKDALE HWY STE D, BAKERSFIELD, CA 93309

(661) 325-7452

(661) 241-9578

CHERIYAN,JERRY - 250991

Group Affiliation: CLINICA SIERRA VISTA

Language(s):

MALAYALAM

Office #
Street:
Phone:
Fax:

OFFICE 1

625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305

(833) 678-2781

(661) 368-0618

ENRIQUEZ-DIAZ,JORGE A - 250153

Group Affiliation:

Language(s):

SPANISH

Office #
Street:
Phone:
Fax:

OFFICE 1

2021 22ND ST, BAKERSFIELD, CA 93301

(661) 864-7076

(661) 864-7131

FAWIBE,OLUWATOSIN SEGUN - 250078

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301

(661) 665-0505

(661) 864-2190

OFFICE 2

707 W VALLEY BLVD, TEHACHAPI, CA 93561

(661) 822-2530

(661) 822-2536

GUERRERO,WHITNEY MELISSA - 250592

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | | |
|---------|-----------------|-------------------------------------|----------------|----------------|
| FRENCH | Office # | Street: | Phone: | Fax: |
| SPANISH | OFFICE 1 | 2021 22ND ST, BAKERSFIELD, CA 93301 | (661) 864-7076 | (661) 864-7131 |

HSIANG,DAVID JIA BIN - 251095

Group Affiliation: COMPREHENSIVE BLOOD AND CANCER CENTER

Language(s):

| | | | |
|-----------------|---|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |

KAPADIA,RAVI NALIN - 250170

Group Affiliation:

Language(s):

| | | | |
|-----------------|------------------------------|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 1217 7TH ST, WASCO, CA 93280 | (661) 758-5500 | (661) 758-5511 |

KAY,SELWYN - 250130

Group Affiliation:

Language(s):

| | | | |
|-----------------|----------------------------------|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 2521 G ST, BAKERSFIELD, CA 93301 | (661) 327-2544 | (661) 327-0555 |

KWOCK,CHRISTINA L - 250155

Group Affiliation:

Language(s):

| | | | |
|-----------------|---|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 500 PUTNAM AVE STE 1026D, PORTERVILLE, CA 93257 | (559) 544-6865 | (559) 791-3909 |

LADDARAN,LESTER ARTHUR - 250951

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| | | | | |
|---------|-----------------|------------------------------------|----------------|----------------|
| TAGALOG | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

MICHEL A. MICHAEL, MD, MICHEL ABDULNUR - 250139

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2020 TRUXTUN AVE, BAKERSFIELD, CA 93301 | (661) 323-9448 | (661) 323-0936 |

MOHAMMEDI, TAHER MUSTAFA - 250944

Group Affiliation:

Language(s):

| | | | | |
|----------|-----------------|---|----------------|----------------|
| GUJARATI | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 3838 SAN DIMAS ST STE B 231, BAKERSFIELD, CA 93301-1494 | (661) 665-0505 | (661) 665-7844 |

MOON, CYRUS R - 251084

Group Affiliation: ADVENTIST HEALTH DELANO

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 1519 GARCES HWY STE 103, DELANO, CA 93215 | (661) 642-6990 | (661) 642-6991 |

NAIK, NIRAV CHHOTUBHAI - 250015

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 4817 CENTENNIAL PLZA WAY STE B, BAKERSFIELD, CA 93312 | (661) 447-4559 | (661) 447-4565 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NISIM,ABRAHAM A - 250424

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| SPANISH | | | | |
| HEBREW | OFFICE 1 | 500 OLD RIVER RD STE 185, BAKERSFIELD, CA 93311 | (661) 748-1886 | (661) 479-5063 |

PATEL,ARPIT B - 250082

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|----------|----------|---|----------------|----------------|
| GUJARATI | | | | |
| | OFFICE 1 | 3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301 | (661) 665-0505 | (661) 864-2190 |
| | OFFICE 2 | 9500 STOCKDALE HWY STE, BAKERSFIELD, CA 93311 | (661) 327-1431 | (661) 321-3286 |

PORTUGAL,DENISE - 250140

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|-------------------------------------|----------------|----------------|
| SPANISH | | | | |
| | OFFICE 1 | 2021 22ND ST, BAKERSFIELD, CA 93301 | (661) 864-7076 | (661) 864-7131 |

PUGALENTHI,AMUDHAN - 250085

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301 | (661) 665-0505 | (661) 864-2190 |

RODRIGUEZ,ROLAND - 250343

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | | |
|---------|-----------------|----------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2521 G ST, BAKERSFIELD, CA 93301 | (661) 327-2544 | (661) 327-0555 |

SINGH,GURMANT P - 250124

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|--|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 8307 BRIMHALL RD STE 1706, BAKERSFIELD, CA 93312 | (661) 467-1477 | (661) 467-1480 |
| | OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-4847 | (661) 725-8051 |

THOMAS,DEBI J - 250295

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|-------------------------------------|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 1201 JEFFERSON ST, DELANO, CA 93215 | (661) 721-0737 | (661) 721-0738 |

GYNECOLOGY-ONCOLOGY

MANRRIQUEZ,ERICA N - 250068

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

SHARMA,KATHRYN JONES - 250974

Group Affiliation: OCEAN PERINATAL MEDICAL GROUP

Language(s):

| | | | | |
|---------|-----------------|----------------|---------------|-------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|-----------------|----------------|---------------|-------------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|--|----------------|----------------|
| OFFICE 1 | 5500 MING AVE STE 254, BAKERSFIELD, CA 93309 | (661) 451-5445 | (661) 240-9583 |
|----------|--|----------------|----------------|

TAMMELA, JONATHAN E - 250070

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

HEMATOLOGY

KANAMORI, DAVID E - 250309

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 633-3669 |

MA, AUSTIN JUNE - 250950

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 1302, BAKERSFIELD, CA 93312 | (661) 490-9595 | (818) 459-3582 |

NAIK, RAHUL RAMESH - 250402

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 302, BAKERSFIELD, CA 93311 | (661) 490-9595 | (661) 232-0550 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NGUYEN,VINH-LINH B - 250416

Group Affiliation:

Language(s):

VIETNAMESE

Office #

Street:

Phone:

Fax:

FRENCH

OFFICE 1

4500 MORNING DR STE 105, BAKERSFIELD, CA 93306

(661) 491-5060

(661) 379-6363

PATEL,RAVI - 250311

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

6501 TRUXTUN AVE, BAKERSFIELD, CA 93309

(661) 322-2206

(661) 322-7027

SHAMBAUGH,SHAWN C - 250315

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

6501 TRUXTUN AVE, BAKERSFIELD, CA 93309

(661) 322-2206

(661) 633-3669

SHEKAR,KOTA CHANDRA - 250156

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

OFFICE 1

465 W PUTNAM AVE, PORTERVILLE, CA 93257

(559) 784-1110

(559) 791-4822

SHEKAR,KOTA CHANDRA - 250939

Group Affiliation:

Language(s):

Office #

Street:

Phone:

Fax:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |
|----------|---|----------------|----------------|

SHEKAR,KOTA CHANDRA - 250156

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|------|
| OFFICE 2 | 400 W MINERAL KING AVE, VISALIA, CA 93291 | (559) 624-2000 | |
| OFFICE 3 | 263 PEARSON DR, PORTERVILLE, CA 93257 | (559) 784-1110 | |

STEVENSON,DUSTIN ERIN - 251074

Group Affiliation: ONCOLOGY PHYSICIANS NETWORK

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 1302, BAKERSFIELD, CA 93312 | (661) 490-9595 | (818) 459-3582 |

HIV/AIDS SPECIALISTS

AMIN,NAVINCHANDRA M - 250548

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4813 COFFEE RD STE 200, BAKERSFIELD, CA 93308 | (661) 664-0252 | (661) 664-2717 |

FELIZARTA,FRANCO A - 250032

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3535 SAN DIMAS ST STE 24, BAKERSFIELD, CA 93301 | (661) 324-3128 | (661) 324-1129 |

TAGALOG
SPANISH

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HEIDARI-FOROUSHANI,ARASH - 250079

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |

REFUGIO,OLIVER NEIL TOLENTINO - 250059

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 N LOOP BLVD STE C, CALIFORNIA CITY, CA 93505 | (661) 874-4050 | (888) 977-1571 |

ROSHAN,BAKHT - 250520

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

HOSPICE CARE

HUERTA GALINDO,JUAN C - 250500

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| SPANISH | | | | |
| FRENCH | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PATEL,RISHI - 251100

Group Affiliation: COMPREHENSIVE BLOOD AND CANCER CENTER

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 327-7027 |

INFECTIOUS DISEASES

AMIN,NAVINCHANDRA M - 250548

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4813 COFFEE RD STE 200, BAKERSFIELD, CA 93308 | (661) 664-0252 | (661) 664-2717 |

FELIZARTA,FRANCO A - 250032

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3535 SAN DIMAS ST STE 24, BAKERSFIELD, CA 93301 | (661) 324-3128 | (661) 324-1129 |

HEIDARI-FOROUSHANI,ARASH - 250079

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KITT,SEE-RUERN S - 250162

Group Affiliation:

Language(s):

THAI

Office #
Street:
Phone:
Fax:

OFFICE 1

2323 16TH ST STE 108, BAKERSFIELD, CA 93301

(661) 325-2448

(661) 325-7425

ROSHAN,BAKHT - 250520

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301

(833) 678-2781

(661) 368-0618

SENINING,RANDOLPH DEL CASTILLO - 251101

Group Affiliation: COMPREHENSIVE BLOOD AND CANCER CENTER

Language(s):

PHILIPPINE (OTHER)

Office #
Street:
Phone:
Fax:

OFFICE 1

6501 TRUXTUN AVE, BAKERSFIELD, CA 93309

(661) 322-2206

(661) 633-3669

INTERNAL MEDICINE

AGGARWAL,ATUL A - 250583

Group Affiliation:

Language(s):

HINDI

PUNJABI

Office #
Street:
Phone:
Fax:

OFFICE 1

625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305

(833) 678-2781

(661) 368-0618

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

AMIN,NAVINCHANDRA M - 250548

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4813 COFFEE RD STE 200, BAKERSFIELD, CA 93308 | (661) 664-0252 | (661) 664-2717 |

BANSAL,RUCHI - 250384

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | (661) 695-6777 | (845) 853-6738 |
| OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-6910 | |

DESAI,MANISH J - 251009

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 12560 BORON AVE, BORON, CA 93516 | (661) 874-4050 | (866) 572-7851 |

HOUSTON,KIYOSHI SEAN SHANNEN - 251076

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

KURSHENBAUM,HOWARD - 251019

Group Affiliation: LA LASER CENTER PC CALIFORNIA PROFESSI

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93305 | (661) 322-2700 | (661) 427-4585 |
| OFFICE 2 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4585 |

LAUGHLIN,ROBERT L - 250012

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A250, BAKERSFIELD, CA 93301 | (661) 323-5300 | (661) 323-5455 |

RAHAL,HARMAN KAUR - 250940

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| HINDI | | | |
| PUNJABI | | | |
| OFFICE 1 | 9802 STOCKDALE HWY STE 102, BAKERSFIELD, CA 93311 | (661) 323-1200 | (661) 323-1204 |
| OFFICE 2 | 1205 GARCES HWY STE 101, DELANO, CA 93215 | (661) 721-1200 | (661) 721-1204 |

VAFADOUSTE,GHOLAMREZA - 250395

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------|----------------|----------------|
| FRENCH | | | |
| PERSIAN | | | |
| OFFICE 1 | 733 3RD ST, MCFARLAND, CA 93250 | (661) 792-3097 | (661) 792-3095 |

LABORATORY

ZOLL LABORATORY SERVICES (FR) - 820294

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 2000 RINGWOOD AVE STE J, SAN JOSE, CA 95131-1728 | (408) 352-6000 | (412) 567-9676 |

LICENSED SOCIAL WORKER

REYES,CINDY IRENE - 250937

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 815 DR MARTIN LUTHER KING JR BLVD, BAKERSFIELD, CA 93307 | (661) 322-3905 | (661) 322-1370 |

MATERNAL FETAL MEDICINE

BHOGAL,MADHU R - 250161

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 541-0739 | (661) 325-0614 |

SAMADI,RAMIN - 250128

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 2501 H ST STE B, BAKERSFIELD, CA 93301 | (661) 259-5617 | (661) 259-9986 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHARMA,KATHRYN JONES - 250974

Group Affiliation: OCEAN PERINATAL MEDICAL GROUP

Language(s):

| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| | OFFICE 1 | 5500 MING AVE STE 254, BAKERSFIELD, CA 93309 | (661) 451-5445 | (661) 240-9583 |

MULTI-SPECIALTY GROUP
DIGNITY HEALTH MEDICAL GROUP - 251036

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 9500 STOCKDALE HWY STE 200, BAKERSFIELD, CA 93311 | (661) 327-1431 | (661) 654-8340 |
| | OFFICE 2 | 3838 SAN DIMAS STE 100, BAKERSFIELD, CA 93301 | (661) 324-4963 | (661) 616-1050 |

GROSSMAN MEDICAL GROUP - 251031

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|-------------------------------------|----------------|----------------|
| | OFFICE 1 | 420 34TH ST, BAKERSFIELD , CA 93301 | (661) 633-2876 | (661) 327-0576 |

SIENNA MEDICAL CORPORATION - 250154

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 6425 LYNCH CANYON DR, LAKE ISABELLA, CA 93240 | (760) 379-8630 | (760) 379-7658 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

NATUROPATHY

GADDAM,KALYAN RAMPRASAD - 251099

Group Affiliation: COMPREHENSIVE BLOOD AND CANCER CENTER

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--------|-----------------|---|----------------|----------------|
| TELUGU | | | | |
| HINDI | OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 633-3669 |

NEPHROLOGY

ADAPA,SREEDHAR R - 251052

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 233 E CALDWELL AVE, VISALIA, CA 93277 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 900 N DOUTY ST STE B, HANFORD, CA 93230 | (559) 228-6600 | (559) 226-3709 |

ALI,SLAMAT - 250318

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|--|----------------|----------------|
| PUNJABI | OFFICE 1 | 3933 COFFEE RD STE B, BAKERSFIELD, CA 93308 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 432 LEXINGTON ST STE, DELANO, CA 93215 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 6621 LAKE ISABELLA BLVD, LAKE ISABELLA, CA 93240 | (559) 228-6600 | (559) 226-3709 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ATWAL,SUKHVIR S - 251046

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| HINDI | | | | |
| PUNJABI | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

CAO,YANGMING - 250177

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| CHINESE | | | | |
| | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6000 | (559) 226-3709 |
| | OFFICE 2 | 433 E CALDWELL AVE, VISALIA, CA 93277 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

CHAPAGAIN,BIKASH - 250319

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--------|----------|-------------------------------------|----------------|----------------|
| HINDI | | | | |
| NEPALI | OFFICE 1 | 568 E HERNDON AVE, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

CHEN,SHAN SHAN - 250486

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| BURMESE | | | | |
| CHINESE | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHINGRA,HEMANT - 251047

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| PUNJABI | | | | |
| URDU | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

DORSAINVIL,DOMINIQUE - 251060

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--------------------------|-----------------|---|----------------|----------------|
| CREOLES & PIDGINS, OTHER | | | | |
| FRENCH | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 1205 EVERGREEN ST, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |

DUFLOT,JOSEPH COLLINS - 251033

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| SPANISH | | | | |
| | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 515 W ACEQUIA STE A, FRESNO, CA 93291 | (559) 228-6600 | (559) 226-3709 |

DUMLAO,MELODY G - 250559

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| TAGALOG | | | | |
| SPANISH | OFFICE 1 | 443 W MORTON AVE STE A, PORTERVILLE, CA 93257 | (559) 788-6207 | (559) 788-6344 |
| | OFFICE 2 | 1980 CECIL AVE, DELANO, CA 93215 | (559) 788-6207 | (559) 788-6344 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 3 833 N SEQUOIA AVE, LINDSAY, CA 93247 (559) 788-6207 (559) 788-6344

GARCHA,AMARINDER S - 251059

Group Affiliation: THE NEPHROLOGY GRP

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| HINDI | OFFICE 1 | 233 E CALDWELL AVE, VISALIA, CA 93277 | (559) 228-6600 | (559) 226-3709 |
| PUNJABI | OFFICE 2 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 900 N DOUTY ST STE B, HANFORD, CA 93230 | (559) 228-6600 | (559) 226-3709 |

GERARDINE,SUPRIYA S - 250320

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-------|-----------------|---|----------------|----------------|
| HINDI | OFFICE 1 | 233 E CALDWELL ST, VISALIA, CA 93277 | (559) 228-6600 | (559) 226-3709 |
| TAMIL | OFFICE 2 | 900 DOUTY ST STE, HANFORD, CA 93230 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

GURM,HARMEET SINGH - 251042

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HOUSTON, KIYOSHI SEAN SHANNEN - 251076

Group Affiliation: THE NEPHROLOGY GROUP, INC

Language(s):

| Language | Office # | Street: | Phone: | Fax: |
|----------|----------|---|----------------|----------------|
| JAPANESE | | | | |
| SPANISH | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

HWANG, MEI-TSUEY - 251041

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| Language | Office # | Street: | Phone: | Fax: |
|----------|----------|---|----------------|----------------|
| MANDARIN | | | | |
| | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

JOSHI, SUDHIR S - 250321

Group Affiliation:

Language(s):

| Language | Office # | Street: | Phone: | Fax: |
|----------|----------|--|----------------|----------------|
| PUNJABI | | | | |
| | OFFICE 1 | 3933 COFFEE RD STE B, BAKERSFIELD, CA 93308 | (661) 588-9999 | (661) 588-9997 |
| | OFFICE 2 | 432 LEXINGTON ST STE, DELANO, CA 93215 | (661) 588-9999 | (661) 588-9997 |
| | OFFICE 3 | 20041 VALLEY BLVD UNIT 3, TEHACHAPI, CA 93561 | (661) 588-9999 | (661) 588-9997 |
| | OFFICE 4 | 6621 LAKE ISABELLA BLVD, LAKE ISABELLA, CA 93240 | (661) 588-9999 | (661) 588-9997 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KARANAM,DEEPTHI - 250964

Group Affiliation: BARTZ-ALTADONNA COMMUNITY HEALTH CENTER

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 12560 BORON AVE, BORON, CA 93516 | (661) 874-4050 | (866) 572-7851 |

KATIBAH,IBRAHIM - 250322

Group Affiliation:

Language(s):

ARABIC

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 2 | 233 E CALDWELL AVE, VISALIA, CA 93277 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 3 | 900 DOUTY ST STE B, HANFORD, CA 90278 | (559) 228-6600 | (559) 226-3709 |

KAUL,RAJEEV - 250323

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

KAZMI,HASHIM R - 250324

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3933 COFFEE RD STE B, BAKERSFIELD, CA 93308 | (661) 588-9999 | (661) 588-9041 |
| OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 3 | 20041 VALLEY BLVD UNIT 3, TEHACHAPI, CA 93561 | (559) 228-6600 | (559) 226-3709 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 4 6621 LAKE ISABELLA BLVD, LAKE ISABELLA, CA 93240 (661) 588-9999 (661) 588-9041

MARTINEZ,GREGORY S - 251061

Group Affiliation: THE NEPHROLOGY GRP

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 2 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

MOKRI,PARHAM A - 250560

Group Affiliation:

Language(s):

FARSI

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5030 OFFICE PARK DR, BAKERSFIELD, CA 93309 | (661) 323-2847 | (661) 323-2261 |

MUBIN,TARIQ - 250561

Group Affiliation:

Language(s):

HINDI

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5030 OFFICE PARK DR, BAKERSFIELD, CA 93309 | (661) 323-2847 | (661) 323-2261 |
| OFFICE 2 | 1980 CECIL AVE, DELANO, CA 93215 | (661) 323-2847 | (661) 324-2328 |

PARIMOO,NAKUL - 250517

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 625 34TH ST, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

REDDY,PAVANI N - 251063

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 1140 OLIVEWOOD DR, MERCED, CA 95348 | (209) 725-2121 | (209) 725-2123 |
| OFFICE 2 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |

SAXENA,NISHKARSH - 250326

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3933 COFFEE RD STE B, BAKERSFIELD, CA 93308 | (661) 588-9999 | (661) 588-9041 |
| OFFICE 2 | 432 LEXINGTON ST STE, DELANO, CA 93215 | (661) 588-9999 | (661) 588-9041 |
| OFFICE 3 | 20041 VALLEY BLVD UNIT 3, TEHACHAPI, CA 93561 | (661) 558-9999 | (661) 588-9041 |
| OFFICE 4 | 6621 LAKE ISABELLA BLVD, LAKE ISABELLA, CA 93240 | (661) 588-9999 | (661) 588-9041 |

SINGH,JASJIT - 251043

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6000 | (559) 226-3709 |
| OFFICE 2 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |
| OFFICE 3 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SU,WEI-SHING - 251044

Group Affiliation: THE NEPHROLOGY GROUP

Language(s):

| CHINESE | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| | OFFICE 1 | 568 E HERNDON AVE STE 201, FRESNO, CA 93720 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 2 | 1122 ROSE AVE STE 2, SELMA, CA 93662 | (559) 228-6600 | (559) 226-3709 |
| | OFFICE 3 | 800 N ST, SANGER, CA 93657 | (559) 228-6600 | (559) 226-3709 |

TUSO,PHILIP J. - 250954

Group Affiliation: BARTZ-ALTADONNA COMMUNITY HEALTH CENTER

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|----------------------------------|----------------|----------------|
| | OFFICE 1 | 12560 BORON AVE, BORON, CA 93516 | (661) 874-4050 | (866) 572-7851 |

UY,IRIS JILL ESTRADA - 251001

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 3933 COFFEE RD STE B, BAKERSFIELD, CA 93308 | (559) 228-6600 | (559) 226-3709 |

WIN,YIN L - 250533

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|--|----------------|----------------|
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

NEUROLOGY

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

BANASH,SHAWN - 250117

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A140, BAKERSFIELD, CA 93301 | (661) 632-7126 | (661) 324-3606 |
| OFFICE 2 | 3838 SAN DIMAS ST STE, BAKERSFIELD, CA 93301 | (661) 324-0500 | (661) 324-0600 |

BIRDI,MAHEEP S - 250390

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8307 BRIMHALL RD STE 1702, BAKERSFIELD, CA 93312 | (661) 432-7851 | (661) 432-7852 |

CHAHIL,BOOTA S - 250317

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 432 LEXINGTON ST STE C, DELANO, CA 93215 | (559) 625-0202 | (661) 206-4081 |
| OFFICE 2 | 117 N AKERS ST STE, VISALIA, CA 93291 | (559) 625-0202 | (661) 206-4081 |

DANDAMUDI,VENKATA S - 250118

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A140, BAKERSFIELD, CA 93301 | (661) 632-7126 | (661) 324-3606 |
| OFFICE 2 | 3838 SAN DIMAS ST STE, BAKERSFIELD, CA 93301 | (661) 324-0500 | (661) 324-0600 |
| OFFICE 3 | 9330 STOCKDALE HWY STE 200, BAKERSFIELD , CA 93311 | (661) 324-0500 | (661) 324-0600 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

JANAKIRAMAN, VENKATESH - 250413

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-------|----------|---|----------------|----------------|
| TAMIL | | | | |
| HINDI | OFFICE 1 | 3400 CALLOWAY DR STE 100, BAKERSFIELD, CA 93312 | (661) 776-3876 | (661) 766-3876 |

KUNHI VEEDU, HARI PRASAD - 250119

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-----------|----------|---|----------------|----------------|
| MALAYALAM | | | | |
| | OFFICE 1 | 3838 SAN DIMAS ST STE A140, BAKERSFIELD, CA 93301 | (661) 632-7126 | (661) 324-3606 |
| | OFFICE 2 | 3838 SAN DIMAS ST STE, BAKERSFIELD, CA 93301 | (661) 324-0500 | (661) 324-0600 |
| | OFFICE 3 | 9330 STOCKDALE HWY STE 200, BAKERSFIELD, CA 93311 | (661) 324-0500 | (661) 324-0600 |

LABIB, SAMEH S - 250539

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--------|----------|----------------------------------|----------------|----------------|
| ARABIC | | | | |
| | OFFICE 1 | 2701 F ST, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 479-8250 |

LIN, JIAN C - 250540

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-----------|----------|----------------------------------|----------------|----------------|
| CANTONESE | | | | |
| | OFFICE 1 | 2701 F ST, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 479-8250 |

MAHENDRARAJAH, SULAGSHAN - 250391

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8355 BRIMHALL RD # 1100, BAKERSFIELD, CA 93312 | (661) 432-7852 | (661) 432-7852 |

NATALI,LUIS C - 250392

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8311 BRIMHALL RD STE 1903, BAKERSFIELD, CA 93312 | (661) 432-7851 | (661) 432-7852 |

PEDOUIM,FARZIN B - 250574

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4300 BIRCH AVE, LAKE ISABELLA, CA 93240 | (760) 379-1791 | (760) 379-1793 |

POPA,THEODORE O - 250988

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A140, BAKERSFIELD, CA 93301 | (661) 632-7126 | (661) 324-3606 |
| OFFICE 2 | 3838 SAN DIMAS ST STE, BAKERSFIELD, CA 93301 | (661) 324-0500 | (661) 324-0600 |
| OFFICE 3 | 9330 STOCKDALE HWY #200, BAKERSFIELD, CA 93313 | (661) 324-0500 | |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

RAGNA, LAURA - 250121

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9330 STOCKDALE HWY STE 200, BAKERSFIELD, CA 93311 | (661) 324-0500 | (661) 324-0600 |

RASHID, KHADIJA S - 251058

Group Affiliation: MAHEEP SINGH BIRDI, M.D.

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8335 BRIMHALL RD STE 1100, BAKERSFIELD, CA 93312 | (661) 432-7852 | (661) 432-7852 |

RAVI, VINUTHA N - 250414

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3400 CALLOWAY DR STE 100, BAKERSFIELD, CA 93312 | (661) 776-3876 | (661) 766-3876 |

SABETIAN, KATAYOUN - 250056

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2323 16TH ST STE 206, BAKERSFIELD, CA 93301 | (661) 322-4601 | (661) 322-6049 |
| OFFICE 1 | 2323 16TH ST STE 206, BAKERSFIELD, CA 93301 | (661) 322-4601 | (661) 322-6049 |

SAREMI, KAVEH - 250300

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2601 OSWELL ST STE 101, BAKERSFIELD, CA 93306 | (661) 872-9999 | (661) 872-9988 |

THOMAS,KIRON - 250122

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9330 STOCKDALE WHY STE 200, BAKERSFIELD, CA 93311 | (661) 324-0500 | (661) 215-5640 |

WANG,YAWEN - 250541

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 1711 28TH ST, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 322-5507 |
| OFFICE 2 | 1711 28TH ST STE, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 324-1107 |

WILLIAMS,JERI Y - 250112

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8327 BRIMHALL RD STE 703, BAKERSFIELD, CA 93312 | (661) 679-3590 | (661) 695-6900 |

NEUROLOGY, VASCULAR

BUI,HAO D - 250038

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|--|----------------|----------------|
| OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |

HONARI,SARA - 250040

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |

NGUYEN,TIEN H - 250041

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |

NEUROPSYCHOLOGY
LABIB,SAMEH S - 250539

Group Affiliation:

Language(s):

ARABIC

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 2701 F ST, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 479-8250 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NEURORADIOLOGY

THOMAS,KIRON - 250122

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9330 STOCKDALE WHY STE 200, BAKERSFIELD, CA 93311 | (661) 324-0500 | (661) 215-5640 |

NEUROSURGERY

BUI,HAO D - 250038

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |

LERAMO,OLUSEGUN B - 250297

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2601 OSWELL ST STE 101, BAKERSFIELD, CA 93306 | (661) 872-9999 | (661) 872-9988 |

RAHIMIFAR,MAJID - 250299

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2601 OSWELL ST STE 101, BAKERSFIELD, CA 93306 | (661) 872-9999 | (661) 872-9988 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

RASHIDI NAIMABADI, MAHMOUD - 251083

Group Affiliation: M RAHIMIFAR MD INC

Language(s):

FARSI

Office #
Street:
Phone:
Fax:

OFFICE 1

2601 OSWELL ST STE 101, BAKERSFIELD, CA 93306

(661) 872-9999

(661) 872-1915

SERXNER, BENJAMIN J - 250115

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

9330 STOCKDALE HWY STE 200, BAKERSFIELD, CA 93311-2284

(661) 324-0500

(661) 324-0600

NUCLEAR MEDICINE

BANERJEE, SUPRATIM - 250357

Group Affiliation:

Language(s):

BENGALI

HINDI

Office #
Street:
Phone:
Fax:

OFFICE 1

432 LEXINGTON ST BLDG B, DELANO, CA 93215

(661) 725-7818

(661) 725-3484

OBSTETRICS & GYNECOLOGY

ALLEN, EDWARD C - 250076

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

3838 SAN DIMAS ST STE A200, BAKERSFIELD, CA 93301

(661) 654-0200

(661) 326-1633

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ANUCHA,CHIBUIKE E - 250123

Group Affiliation:

Language(s):

IGBO

Office #
Street:
Phone:
Fax:

OFFICE 1

3941 SAN DIMAS ST STE 104, BAKERSFIELD, CA 93301

(661) 637-1006

(661) 637-1020

BALDONADO,JESUS P - 250450

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

1500 6TH AVE, DELANO, CA 93215

(661) 725-1010

(661) 725-1117

BOKEN,LORIANNE - 251032

Group Affiliation:

Language(s):

Office #
Street:
Phone:
Fax:

OFFICE 1

465 W PUTNAM AVE, PORTERVILLE, CA 93257

(559) 784-1110

(209) 956-7733

OFFICE 2

400 W MINERAL KING AVE, VISALIA, CA 93291

(559) 624-2000

DATTA,BABITA - 250102

Group Affiliation:

Language(s):

SPANISH

HINDI

Office #
Street:
Phone:
Fax:

OFFICE 1

143 W KERN AVE, BAKERSFIELD, CA 93250

(661) 310-1002

(661) 677-6008

DATTA,BABITA - 250169

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | | |
|---------|-----------------|------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 1217 7TH ST, WASCO, CA 93308 | (661) 758-5500 | (661) 758-5511 |

DELMUNDO,NOEL G - 250452

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| TAGALOG | OFFICE 1 | 8339 BRIMHALL RD STE 1303, BAKERSFIELD, CA 93312 | (661) 829-0026 | (661) 829-0027 |

DENNIS-JOHNSON,DEBBIE A - 250287

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|-------------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| FRENCH | OFFICE 1 | 1201 JEFFERSON ST, DELANO, CA 93215 | (661) 721-0737 | (661) 721-0738 |

DENNIS-JOHNSON,DEBBIE A - 250451

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| FRENCH | OFFICE 1 | 1500 6TH AVE, DELANO, CA 93215 | (661) 725-1010 | (661) 725-6940 |

DENNIS-JOHNSON,DEBBIE A - 250287

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| FRENCH | OFFICE 2 | 2300 7TH ST, WASCO, CA 93280 | (661) 758-4184 | (661) 758-4188 |

GHAI,SONIA - 250492

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

GUPTA, PARUL - 251086

Group Affiliation: PORTERVILLE COMMUNITY PHYSICIANS INC

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| HINDI | | | |
| PUNJABI | | | |
| OFFICE 1 | 465 W PUTNAM AVE, PORTERVILLE, CA 93257 | (559) 784-1110 | (209) 956-7733 |
| OFFICE 2 | 263 PEARSON DR, PORTERVILLE, CA 93257 | (559) 784-1110 | |
| OFFICE 3 | 400 W MINERAL KING AVE, VISALIA, CA 93291 | (559) 624-2000 | |

HASHEMI, EMAD A - 250497

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

HAYES, CARL E - 250057

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 N LOOP BLVD STE C, CALIFORNIA CITY, CA 93505 | (661) 874-4050 | (888) 977-1571 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KLIS,GREGORY R - 250453

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 1303, BAKERSFIELD, CA 93312 | (661) 829-0026 | (661) 829-0027 |

LASCANO,MIGUEL L - 250289

Group Affiliation:

Language(s):

TAGALOG

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1201 JEFFERSON ST, DELANO, CA 93215 | (661) 721-0737 | (661) 721-0738 |
| OFFICE 2 | 2300 7TH ST, WASCO, CA 93280 | (661) 758-4184 | |

LEE,JUSTIN T - 250401

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

LEE,JUSTIN T - 250067

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

MANGAT,CHARNPAL S - 250411

Group Affiliation: KERN RAD

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | | |
|---------|-----------------|--|----------------|----------------|
| PUNJABI | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 2700 F ST STE 300 2ND FLR, BAKERSFIELD, CA 93301 | (661) 322-4902 | (661) 322-4904 |

MANGAT, RAMNEET K - 250505

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

MCDERMOTT, ROXANNE M - 250506

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

MELENDEZ, PHILIPP R - 250355

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|------------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 608 34TH ST, BAKERSFIELD, CA 93301 | (661) 325-7103 | (661) 325-7132 |

OWENS, JOHN R - 250138

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|--|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 4000 PHYSICIANS BLVD STE E211, BAKERSFIELD, CA 93301 | (661) 401-2000 | (661) 401-2015 |

PEREZ, LEONARD - 250073

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| SPANISH | | | |
| OFFICE 1 | 2005 17TH ST, BAKERSFIELD, CA 93301 | (661) 322-6700 | (661) 322-6707 |

RATL MRAD, YASSER S - 250990

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1022 CALLOWAY DR, BAKERSFIELD, CA 93312 | (866) 707-6664 | (661) 746-9197 |
| OFFICE 2 | 210 N CHESTER AVE, BAKERSFIELD, CA 93308 | (866) 707-6664 | (661) 746-9197 |

ROBINSON, RHONDA L - 250519

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 425 DEL SOL PKWY, DELANO, CA 93215 | (661) 720-4011 | (661) 720-4012 |

SANYA, RAHIMA H - 250522

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| SWAHILI | | | |
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

SHAKESPEARE, CARY SCOTT - 251073

Group Affiliation: CLINICA SIERRA VISTA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| SPANISH | | | |
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SHARMA,RAHUL - 250099

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| HINDI | | | | |
| PUNJABI | OFFICE 1 | 9610 STOCKDALE HWY STE B, BAKERSFIELD, CA 93311 | (661) 664-0314 | (661) 664-0997 |
| | OFFICE 2 | 1217 7TH ST, WASCO, CA 93280 | (661) 758-5500 | (661) 758-5511 |
| | OFFICE 3 | 432 LEXINGTON ST, DELANO, CA 93215 | (661) 725-2512 | |

SRINIVAS,VASANTHI - 250984

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2005 17TH ST, BAKERSFIELD , CA 93301-4203 | (661) 322-6700 | (661) 322-6707 |

SRINIVAS,VASANTHI - 250294

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-------|----------|-------------------------------------|----------------|----------------|
| HINDI | | | | |
| TAMIL | OFFICE 1 | 1201 JEFFERSON ST, DELANO, CA 93215 | (661) 721-0737 | (661) 721-0738 |
| | OFFICE 2 | 2300 7TH ST, WASCO, CA 93280 | (661) 758-4184 | (661) 758-4188 |

STEWART,DEBRA L - 250527

Group Affiliation: CLINICA SIERRA VISTA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

TANG,MINH T - 251008

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1187 E HERNDON STE 106, FRESNO, CA 93720 | (559) 224-0900 | (559) 224-9009 |

VARNES,KENNETH J - 250531

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

ONCOLOGY

KANAMORI,DAVID E - 250309

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 633-3669 |

MA,AUSTIN JUNE - 250950

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 1302, BAKERSFIELD, CA 93312 | (661) 490-9595 | (818) 459-3582 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

NAIK,RAHUL RAMESH - 250402

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 302, BAKERSFIELD, CA 93311 | (661) 490-9595 | (661) 232-0550 |

NGUYEN,VINH-LINH B - 250416

Group Affiliation:

Language(s):

VIETNAMESE

FRENCH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4500 MORNING DR STE 105, BAKERSFIELD, CA 93306 | (661) 491-5060 | (661) 379-6363 |

PATEL,RAVI - 250311

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |

SHAMBAUGH,SHAWN C - 250315

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 633-3669 |

SHEKAR,KOTA CHANDRA - 250156

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 465 W PUTNAM AVE, PORTERVILLE, CA 93257 (559) 784-1110 (559) 791-4822

SHEKAR,KOTA CHANDRA - 250939

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |

SHEKAR,KOTA CHANDRA - 250156

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|------|
| OFFICE 2 | 400 W MINERAL KING AVE, VISALIA, CA 93291 | (559) 624-2000 | |
| OFFICE 3 | 263 PEARSON DR, PORTERVILLE, CA 93257 | (559) 784-1110 | |

STEVENSON,DUSTIN ERIN - 251074

Group Affiliation: ONCOLOGY PHYSICIANS NETWORK

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8339 BRIMHALL RD STE 1302, BAKERSFIELD, CA 93312 | (661) 490-9595 | (818) 459-3582 |

OPHTHALMOLOGY

ACE EYECARE INC - 250387

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 1721 WESTWIND DR STE B, BAKERSFIELD, CA 93301 | (661) 215-1006 | (661) 324-1172 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

ALEXANDRAKIS,GEORGE - 250052

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1851 OAK ST STE B, BAKERSFIELD, CA 93301 | (661) 323-4200 | (661) 215-1857 |

CHAWLA,ANUJ - 250026

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9500 STOCKDALE HWY STE 108, BAKERSFIELD, CA 93311 | (661) 663-8500 | (661) 663-8688 |
| OFFICE 2 | 137 S ASPEN CT STE, VISALIA, CA 93291 | (559) 733-7024 | (559) 733-7169 |
| OFFICE 3 | 2323 16TH ST STE 400, BAKERSFIELD, CA 93301 | (661) 479-0757 | (661) 634-8044 |

CLARK,ANDREW JAMES - 250936

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |
| OFFICE 2 | 525 E MICHELTORENA ST STE A, SANTA BARBARA, CA 93103 | (805) 963-1648 | (805) 965-5214 |

DHOOT,DILSHER S - 250033

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GUPTA,ANKUR SUDHIR - 250593

Group Affiliation:

Language(s):

HINDI

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |
| OFFICE 2 | 38660 MEDICAL CENTER DR STE A350, PALMDALE, CA 93551 | (661) 951-9519 | (661) 948-6909 |

HAIR,DAVID B - 250962

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------------|----------------|----------------|
| OFFICE 1 | 7508 MEANY AVE, BAKERSFIELD, CA 93308 | (661) 589-9400 | (661) 589-9499 |

KIM,RICHARD D J - 250027

Group Affiliation:

Language(s):

KOREAN

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2323 16TH ST STE 400, BAKERSFIELD, CA 93301 | (800) 898-2020 | (844) 897-3788 |

KOHN,ROGER A - 250558

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2920 F ST STE C7, BAKERSFIELD, CA 93301 | (661) 322-5435 | (661) 322-4304 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KOUCHOUK,AMR M - 250382

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3801 SAN DIMAS ST BLDG A, BAKERSFIELD, CA 93301 | (661) 460-7640 | (661) 457-9677 |

LEARNED,DANIEL L - 250034

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |

LEIBOWITZ,STEVEN - 250426

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5301 TRUXTUN AVE STE 200, BAKERSFIELD, CA 93309 | (661) 412-2322 | (702) 255-9308 |

STEINLE,NATHAN C - 250035

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |

TAWANSY,KHALED - 250030

Group Affiliation: KHALED A TAWANSY, MD

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 7447 N FIGUEROA ST STE 200, LOS ANGELES, CA 90041 (661) 327-4499 (661) 327-4381

WALIA,SANDEEP SINGH - 250407

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| PUNJABI | OFFICE 1 | 215 CHINA GRADE LOOP, BAKERSFIELD, CA 93308 | (661) 393-2331 | (661) 393-6284 |
| SPANISH | | | | |

WALIA,SANDEEP SINGH - 250589

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |

WALIA,SANDEEP SINGH - 250407

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| PUNJABI | OFFICE 2 | 11901 BOLTHOUSE DR STE, BAKERSFIELD, CA 93311 | (661) 393-2331 | (661) 393-6284 |
| SPANISH | | | | |

WARD,MICHAEL - 250587

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 9500 STOCKDALE HWY STE 108, BAKERSFIELD, CA 93311 | (800) 898-2020 | (844) 897-3788 |
| | OFFICE 2 | 2323 16TH ST STE 400, BAKERSFIELD, CA 93301 | (661) 479-0757 | (844) 897-3788 |

YANG,DONG D - 250036

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5555 BUSINESS PARK S STE 100, BAKERSFIELD, CA 93309 | (661) 325-4393 | (661) 322-8489 |

YAPLEE,STEVEN M - 250346

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9700 BRIMHALL RD, BAKERSFIELD, CA 93312 | (661) 631-2020 | (661) 829-8657 |
| OFFICE 2 | 1519 GARCES HWY STE 101, DELANO, CA 93215 | (661) 721-2020 | (661) 721-2401 |

OPTOMETRY

BECKMAN,JESSICA J - 250997

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 44815 FIG AVE, LANCASTER, CA 93534 | (800) 898-2020 | (844) 897-3788 |

CHEUNG,MARK - 251098

Group Affiliation: CLEAR POINT OPTOMETRY

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 12716 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93314 | (661) 206-2830 | (661) 206-2850 |

DESANTIAGO,YHAIR - 251097

Group Affiliation: RETINA INSTITUTE OF CALIFORNIA MEDICAL

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | | |
|---------|-----------------|------------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 44815 FIG AVE, LANCASTER, CA 93534 | (800) 898-2020 | (844) 897-3788 |

GOLDSTONE,ADAM D - 250945

Group Affiliation:

Language(s):

| | | | |
|-----------------|------------------------------------|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 44815 FIG AVE, LANCASTER, CA 93534 | (800) 898-2020 | (844) 897-3788 |

GROVES,JACK D - 250947

Group Affiliation:

Language(s):

| | | | |
|-----------------|--------------------------------------|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 4649 PLANZ RD, BAKERSFIELD, CA 93309 | (661) 833-4040 | (661) 833-6721 |

HAUCK-WILSON,COLE RYAN - 250983

Group Affiliation: CLINICA SIERRA VISTA

Language(s):

| | | | |
|-----------------|---|----------------|----------------|
| Office # | Street: | Phone: | Fax: |
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |

INOUYE,ANDREA K - 251050

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

NGUYEN,ALAIN H - 250001

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| | Office # | Street: | Phone: | Fax: |
|------------|-----------------|--|----------------|----------------|
| VIETNAMESE | OFFICE 1 | 3880 GOSFORD RD STE 200, BAKERSFIELD, CA 93309 | (661) 396-7772 | (661) 396-7773 |
| SPANISH | OFFICE 2 | 2020 NILES ST UNI, BAKERSFIELD, CA 93305 | (661) 871-7770 | (661) 871-7177 |

SHIVELY,KYLE D - 820218

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 5603 AUBURN ST STE A, BAKERSFIELD, CA 93306 | (661) 489-7765 | (661) 246-3566 |

SILOS,VIRGINIE FON DI - 251081

Group Affiliation: RETINA INSTITUTE OF CALIFORNIA MEDICAL

Language(s):

| | Office # | Street: | Phone: | Fax: |
|-----------|-----------------|---|----------------|----------------|
| CANTONESE | OFFICE 1 | 2323 16TH ST STE 400, BAKERSFIELD, CA 93301 | (661) 479-0757 | (844) 897-3788 |
| SPANISH | | | | |

ORAL MAXILLOFACIAL SURGERY
JULIAN,ROBERT S - 251026

Group Affiliation: OMFS CARE CENTER PARTNERS

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 215 N FRESNO ST STE 490, FRESNO, CA 93701 | (559) 459-4101 | (559) 459-5744 |

WOO,BRIAN M - 820227

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 215 N FRESNO ST STE 490, FRESNO, CA 93701 | (559) 459-4101 | (559) 459-5744 |

ZAIDI,AHMED B - 250436

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 215 N FRESNO ST STE 490, FRESNO, CA 93701 | (559) 459-4101 | (559) 459-5744 |

ZAKHARY,GEORGE M - 250437

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 215 N FRESNO ST STE 490, FRESNO, CA 93701 | (559) 459-4101 | (559) 459-5744 |

ORTHOPEDIC SURGERY

BALCH,KARL R - 250438

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

COPPOLA JR,ALFRED J - 250160

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 300, BAKERSFIELD, CA 93311 | (661) 664-2200 | (661) 664-6206 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FERKEL,ERIC I - 250440

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |
| OFFICE 2 | 6815 NOBLE AVE, VAN NUYS, CA 91405 | (818) 901-6600 | (818) 997-7826 |

GRIMES,JAMES BRUCE - 250946

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 6001 TRUXTUN AVE STE 260B, BAKERSFIELD, CA 93309 | (661) 324-2491 | (661) 324-7943 |

HAMILTON,CHRISTOPHER D - 250441

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

HERNANDEZ,JAIME D - 250442

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |
| OFFICE 2 | 6815 NOBLE AVE, VAN NUYS, CA 91405 | (818) 901-6600 | (818) 997-7826 |

KERN BONE AND JOINT SPECIALISTS - 250167

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9330 STOCKDALE HWY STE 600, BAKERSFIELD, CA 93311 | (661) 324-2491 | (661) 324-7943 |

MALERICH, MATTHEW M - 250547

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 300, BAKERSFIELD, CA 93311 | (661) 664-2300 | (661) 663-6711 |

MERRIMAN, JARRAD A - 250443

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

**OLUYEDE, OLUWADAMILOLA OLUBUSAYO -
250444**

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

SAIED, FADI S - 250445

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SCHAMBLIN, MARK L - 250447

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

SHAPIRO, TODD ADAM - 250449

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

SRIVASTAVA, KARAN - 250417

Group Affiliation: JOINT AND BONE INSTITUTE OF CA MEDICAL C

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| SPANISH | | | |
| HINDI | | | |
| OFFICE 1 | 9610 STOCKDALE HWY STE C, BAKERSFIELD, CA 93311 | (661) 544-3352 | (661) 544-3432 |
| OFFICE 2 | 5300 LENNOX AVE STE, BAKERSFIELD, CA 93309 | (661) 544-3352 | (661) 544-3432 |
| OFFICE 3 | 432 LEXINGTON ST STE C, DELANO, CA 93215 | (661) 544-3352 | (661) 544-3432 |
| OFFICE 4 | 110 N D ST, PORTERVILLE, CA 93257 | (661) 544-3352 | (661) 725-5030 |

SRIVASTAVA, PRAMOD K - 250328

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| HINDI | | | |
| OFFICE 1 | 432 LEXINGTON ST STE C, DELANO, CA 93215 | (661) 725-0713 | (661) 721-2629 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 110 N D ST, PORTERVILLE, CA 93257 (559) 782-5177 (559) 782-5176

TAN,TIMOTHY L - 250157

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 465 W PUTNAM AVE, PORTERVILLE, CA 93257 | (559) 788-6081 | (559) 544-1004 |
| OFFICE 2 | 400 W MINERAL KING AVE, VISALIA, CA 93291 | (559) 624-2000 | |
| OFFICE 3 | 263 PEARSON DR, PORTERVILLE, CA 93257 | (559) 784-1110 | |

ULTIMATE FAMILY ORTHOPAEDIC - 250409

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8307 BRIMHALL RD STE 1703, BAKERSFIELD, CA 93312 | (661) 249-6626 | (661) 643-3293 |

ORTHOPEDIC SURGERY, HAND
BOWEN,DAVID T - 250105

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 300, BAKERSFIELD, CA 93311 | (661) 664-2200 | (661) 664-2202 |

ERFANIAN,KAMIL - 250439

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
| | | | |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |
|----------|---|----------------|----------------|

WONG, CHARLES D - 250043

Group Affiliation: CHARLES D WONG DO MEDICAL CORPORATION

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3300 BUENA VISTA RD BLDG K, BAKERSFIELD, CA 93311 | (661) 671-1717 | (661) 664-7304 |

OTOLARYNGOLOGY

ARYA, SATYA P - 250000

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 2011 TRUXTUN AVE, BAKERSFIELD, CA 93301 | (661) 327-0300 | (661) 327-0897 |

VADAPALLI, SATISH R - 250150

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4100 EMPIRE DR STE 120, BAKERSFIELD, CA 93309 | (661) 259-2500 | (661) 362-0228 |

ZERLIN, GARY K - 250557

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|-------------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 2103 18TH ST, BAKERSFIELD, CA 93301 | (661) 327-3449 | (661) 327-4549 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

PAIN MANAGEMENT

BRAZILL,JOHN L - 250031

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2323 16TH ST STE 504, BAKERSFIELD, CA 93301 | (661) 395-1335 | (661) 395-1322 |

GRANDHE,SUNDEEP - 251091

Group Affiliation: CENTRAL VALLEY PAIN MANAGEMENT

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 105, BAKERSFIELD, CA 93311 | (559) 779-1888 | |
| OFFICE 2 | 1663 E PROSPERITY AVE, TULARE, CA 93274 | (559) 684-4246 | (559) 684-7247 |
| OFFICE 3 | 1805 E FIR AVE, FRESNO, CA 93720 | (559) 321-8510 | (559) 321-8512 |

KHOURY,PHILIP G - 250388

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3850 RIVERLAKES DR STE B, BAKERSFIELD, CA 93312 | (661) 241-9338 | (661) 402-3540 |

MANDALAYWALA,NEIL - 251085

Group Affiliation: REGENTS OF THE UNIVERSITY OF CALIFORNIA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

WASHINGTON,DEIRDRE R - 250133

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5329 OFFICE CENTER CT STE 110, BAKERSFIELD, CA 93309 | (661) 862-8582 | (661) 230-6585 |

PALLIATIVE CARE

HUERTA GALINDO,JUAN C - 250500

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

PATEL,RISHI - 251100

Group Affiliation: COMPREHENSIVE BLOOD AND CANCER CENTER

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 327-7027 |

PATHOLOGY

LIU,JIAFAN - 251109

Group Affiliation: PARAMVIR S. RAHAL MD INC

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9802 STOCKDALE HWY STE 102, BAKERSFIELD, CA 93311 | (661) 323-1200 | (661) 323-1204 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PEDIATRIC CARDIOLOGY

BANKS,AARON E - 250046

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|---------------------|---|----------------|----------------|
| SPANISH OFFICE 1 | 300 OLD RIVER RD STE 170, BAKERSFIELD, CA 93311 | (661) 664-0808 | (800) 691-2492 |

PEDIATRIC ENDOCRINOLOGY

CHING,JOHN S - 250064

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|--------------------------------|--|----------------|----------------|
| SPANISH CHINESE OFFICE 1 | 6001 TRUXTUN AVE STE A130, BAKERSFIELD, CA 93309 | (661) 836-7799 | (661) 208-8180 |

PEDIATRIC NEUROLOGY

DAVID,RAYMUND R - 250423

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|--------------------------------|---|----------------|----------------|
| SPANISH TAGALOG OFFICE 1 | 5701 YOUNG ST BLDG C-203, BAKERSFIELD, CA 93311 | (661) 885-7008 | (888) 977-3751 |

WANG,YAWEN - 250541

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1711 28TH ST, BAKERSFIELD, CA 93301 | (661) 322-3008 | (661) 322-5507 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 2 1711 28TH ST STE, BAKERSFIELD, CA 93301 (661) 322-3008 (661) 324-1107

PEDIATRIC PSYCHIATRY

DODDASHI, VEENA R - 250397

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8329 BRIMHALL RD BLDG 800 STE 804, BAKERSFIELD, CA 93312 | (661) 431-1555 | (661) 633-3944 |

LUI, KINGWAI - 250419

Group Affiliation:

Language(s):

CANTONESE

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD, CA 93311 | (661) 735-3887 | (661) 836-5545 |

MA, ALBERT Y - 250420

Group Affiliation:

Language(s):

MANDARIN

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD, CA 93311 | (661) 735-3887 | (661) 836-5545 |

PEDIATRICS

YOUNG, MATT N - 250570

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PHYSICAL MEDICINE & REHAB

CULL,DEEPTHI S - 251012

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5001 COMMERCE DR, BAKERSFIELD, CA 93309-0648 | (661) 323-5500 | (661) 633-3761 |

DIMMITT,EVAN T - 250408

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5001 COMMERCE DR, BAKERSFIELD, CA 93309 | (661) 323-5300 | (661) 410-3222 |

LIMJOCO,BETTINA T - 250298

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2601 OSWELL ST STE 101, BAKERSFIELD, CA 93306 | (661) 872-9999 | (661) 872-9988 |

LIN,BINGTAO - 250422

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 105, BAKERSFIELD, CA 93311 | (661) 327-9300 | (661) 327-9301 |
| OFFICE 2 | 1663 E PROSPERITY AVE, TULARE, CA 93274 | (559) 684-4246 | (559) 684-7247 |
| OFFICE 3 | 1805 E FIR AVE, FRESNO, CA 93720 | (559) 321-8510 | (559) 321-8512 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MANDALAYWALA, NEIL - 251085

Group Affiliation: REGENTS OF THE UNIVERSITY OF CALIFORNIA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

NATH, MAHENDRA - 250941

Group Affiliation:

Language(s):

HINDI

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 1663 E PROSPERITY AVE, TULARE, CA 93274 | (559) 684-4246 | (559) 684-7247 |
| OFFICE 2 | 1805 E FIR AVE, FRESNO, CA 93720 | (559) 321-8510 | (559) 321-8512 |
| OFFICE 3 | 500 OLD RIVER RD STE 105, BAKERSFIELD, CA 93311 | (661) 327-9300 | (661) 327-9301 |

PACIFIC PAIN PHYSICIANS - 820291

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2901 SILLECT AVE STE 200, BAKERSFIELD, CA 93308 | (661) 401-6150 | (805) 563-0364 |

RAO, ARUNA DANGAT - 250958

Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA

Language(s):

GUJARATI

HINDI

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------|----------------|----------------|
| OFFICE 1 | 733 3RD ST, MCFARLAND, CA 93250 | (661) 792-3097 | (661) 792-3095 |

YOON, CHRIS S - 250053

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|-----------------|---|----------------|----------------|
| SPANISH | | | | |
| KOREAN | OFFICE 1 | 5001 COMMERCE DR STE 100, BAKERSFIELD, CA 93309 | (661) 325-8375 | (661) 633-3799 |

PHYSICAL THERAPY

ALPHA DYNAMIC PHYSICAL THERAPY - 820116

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|-------------------------------|----------------|----------------|
| | OFFICE 1 | 623 MAIN ST, DELANO, CA 93215 | (661) 474-2600 | (661) 474-2601 |

LAMONT PHYSICAL THERAPY - 820132

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---------------------------------------|----------------|----------------|
| | OFFICE 1 | 10130 MAIN ST STE A, LAMONT, CA 93241 | (661) 845-0600 | (661) 845-0640 |

**VINCENT ALARCON PHYSICAL THERAPY PC -
820293**

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|-----------------|---|----------------|----------------|
| | OFFICE 1 | 2230 W SUNNYSIDE AVE STE 1, VISALIA, CA 93277 | (559) 713-6461 | (559) 713-6012 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PLASTIC AND RECONST SUR

BAUGHMAN,ETHAN J - 250565

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|------------------------------------|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

BOWEN,DAVID T - 250105

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 9300 STOCKDALE HWY STE 300, BAKERSFIELD, CA 93311 | (661) 664-2200 | (661) 664-2202 |

DEV,VIPUL R - 250141

Group Affiliation:

Language(s):

| | | | | |
|----------|-----------------|---|----------------|----------------|
| GUJARATI | Office # | Street: | Phone: | Fax: |
| HINDI | OFFICE 1 | 2901 SILLECT AVE STE 201, BAKERSFIELD, CA 93308 | (661) 327-2101 | (661) 327-2554 |

ERFANIAN,KAMIL - 250439

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 5201 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 328-5565 | (661) 328-5573 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

EVANS,BRIAN N - 250566

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

GROSSMAN,PETER H - 250568

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

MAJIDIAN,ALEXANDER M - 250569

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------------|----------------|----------------|
| OFFICE 1 | 420 34TH ST, BAKERSFIELD, CA 93301 | (661) 633-2876 | (661) 327-0576 |

MITTS,GORDON M - 250341

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 2525 H ST, BAKERSFIELD, CA 93301 | (661) 324-7208 | (661) 324-3403 |

RAJAN,MEENAKSHI - 251103

Group Affiliation: CA INSTITUTE OF COSMETIC & RECONSTRUCTIV

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

OFFICE 1 2901 SILLECT AVE STE 201, BAKERSFIELD, CA 93308 (661) 327-2101 (661) 327-2554

SAHAR, DAVID E - 250142

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2901 SILLECT AVE STE 201, BAKERSFIELD, CA 93308 | (661) 327-2101 | (661) 327-2554 |

PODIATRY

CONLEY, ALEXIS NICOLE - 250330

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |

DAVIS, SCOTT R - 250366

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93311 | (661) 663-8483 | (661) 663-3095 |

FLORES, MICHAEL A - 250331

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| OFFICE 2 | 1519 GARCES HWY STE, DELANO, CA 93215 | (661) 725-1664 | (661) 725-2786 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|--|----------------|----------------|
| OFFICE 3 | 8307 BRIMHALL RD STE 1704, BAKERSFIELD, CA 93312 | (661) 832-1667 | (661) 832-7145 |
| OFFICE 4 | 1086 N CHERRY ST, TULARE, CA 93274 | (661) 832-1667 | (661) 832-7145 |

GLOVER,GAVIN THOMAS - 251090

Group Affiliation: FOOT AND ANKLE INSTITUTE

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93311 | (661) 663-8483 | (661) 663-3095 |

HENTO,HEATHER A - 250367

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93311 | (661) 663-8483 | (661) 663-3095 |

KIM,PAUL M - 250333

Group Affiliation:

Language(s):

KOREAN

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| OFFICE 2 | 440 W PUTNAM AVE, PORTERVILLE, CA 93257 | (559) 784-3110 | (559) 784-7406 |

KIM,SOLOMON - 250334

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| OFFICE 2 | 440 W PUTNAM AVE, PORTERVILLE, CA 93257 | (559) 784-3110 | (559) 784-7406 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LAM,DELPHINE - 251039

Group Affiliation: STOCKDALE PODIATRY GROUP, INC.

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |

LIN,TZU LU - 250335

Group Affiliation:

Language(s):

MANDARIN

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| OFFICE 2 | 1086 N CHERRY ST, TULARE, CA 93274 | (661) 832-1667 | (661) 832-7145 |

NELSON,THOMAS D - 250336

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|-------------------------------------|----------------|----------------|
| OFFICE 1 | 1701 27TH ST, BAKERSFIELD, CA 93301 | (661) 322-2895 | (661) 322-2897 |

NELSON,THOMAS D - 250512

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 815 DR MARTIN LUTHER KING JR B, BAKERSFIELD, CA 93307 | (661) 322-3905 | (661) 322-1370 |

NELSON,THOMAS D - 250336

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| | OFFICE 2 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| | OFFICE 3 | 1519 GARCES HWY STE 107, DELANO, CA 93215 | (661) 725-1664 | (661) 725-2786 |
| | OFFICE 4 | 8307 BRIMHALL RD STE 1704, BAKERSFIELD, CA 93312 | (661) 832-1667 | (661) 832-7145 |

PASABOC,LIVIU G - 250337

Group Affiliation:

Language(s):

| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| | OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |
| | OFFICE 2 | 1519 GARCES HWY STE, DELANO, CA 93215 | (661) 725-1664 | (661) 725-2786 |
| | OFFICE 3 | 8307 BRIMHALL RD STE 1704, BAKERSFIELD, CA 93312 | (661) 832-1667 | (661) 832-7145 |
| | OFFICE 4 | 1086 N CHERRY ST, TULARE, CA 93274 | (661) 832-1667 | (661) 832-7145 |

PATEL,PARIMAL B - 250368

Group Affiliation:

Language(s):

| HINDI GUJARATI | Office # | Street: | Phone: | Fax: |
|-------------------|----------|---|----------------|----------------|
| | OFFICE 1 | 9300 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93311 | (661) 663-8483 | (661) 663-3095 |

SPOHN-GROSS,HOLLY A - 250575

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|---|----------------|----------------|
| | OFFICE 1 | 4300 BIRCH AVE, LAKE ISABELLA, CA 93240 | (760) 379-1791 | (760) 379-1793 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

SPOHN-GROSS,HOLLY A - 250090

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6425 LYNCH CANYON DR, LAKE ISABELLA, CA 93240 | (760) 379-8630 | (760) 379-7658 |

TEELA,JAMES E - 250338

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4946 W MINERAL KING AVE, VISALIA, CA 93291 | (559) 624-1405 | (559) 624-1746 |
| OFFICE 2 | 1086 N CHERRY ST, TULARE, CA 93274 | (661) 832-1667 | (661) 832-7145 |

VO,TIMOTHY LAM - 250339

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (661) 832-1667 | (661) 832-7145 |

ZIMMERMAN,JOHN C - 250369

Group Affiliation:

Language(s):

SPANISH

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 9300 STOCKDALE HWY STE 400, BAKERSFIELD, CA 93311 | (661) 663-8483 | (661) 663-3095 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PSYCHIATRY

BHANVER,INDER - 250482

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--------------------------------------|----------------|----------------|
| OFFICE 1 | 7800 NILES ST, BAKERSFIELD, CA 93306 | (661) 328-4284 | (661) 616-9977 |

CAMACHO,HOMERO - 250485

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------|----------------|----------------|
| OFFICE 1 | 355 DOVER PWY, DELANO, CA 93215 | (661) 725-2788 | (661) 725-2788 |

DODDAKASHI,VEENA R - 250397

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8329 BRIMHALL RD BLDG 800 STE 804, BAKERSFIELD, CA 93312 | (661) 431-1555 | (661) 633-3944 |

ESLAMI,SETARE - 250418

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|-------------------|--|----------------|----------------|
| FARSI OFFICE 1 | 1500 HAGGIN OAKS BLVD STE 202, BAKERSFIELD, CA 93311 | (661) 735-3887 | (661) 836-5545 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

FERNANDO,GERARD I - 250398

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 6313 SCHIRRA CT STE 1, BAKERSFIELD, CA 93313 | (661) 323-6410 | (661) 323-7631 |
| OFFICE 2 | 8329 BRIMHALL RD BLD, BAKERSFIELD, CA 93312 | (661) 431-1555 | (661) 581-7670 |

GAREWAL,JAGDEEP S - 250491

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2400 WIBLE RD STE 14, BAKERSFIELD, CA 93304 | (661) 835-1240 | (661) 835-4667 |

IBAZEBO,EHIREME A - 250501

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

KALMAN,LESLIE PAUL - 250393

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------|----------------|----------------|
| OFFICE 1 | 733 3RD ST, MCFARLAND, CA 93250 | (661) 792-3097 | (661) 792-3095 |

KAMEL,KAMEL L - 250563

Group Affiliation:

Language(s):

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | Office # | Street: | Phone: | Fax: |
|--------------------------------|----------|---|----------------|----------------|
| | OFFICE 1 | 4199 CAMPUS DR STE 550, IRVINE, CA 92612 | (949) 293-3440 | (949) 679-2047 |
| KAUR,SNEHPREET - 251056 | | | | |
| Language(s): | | | | |
| HINDI | | Group Affiliation: | | |
| PUNJABI | | | | |
| | OFFICE 1 | 5401 WHITE LN, BAKERSFIELD, CA 93309 | (661) 396-7100 | (661) 735-8901 |
| KAUR,SNEHPREET - 251082 | | | | |
| Language(s): | | | | |
| HINDI | | Group Affiliation: GOOD SAMARITAN HEALTH CENTER | | |
| PUNJABI | | | | |
| | OFFICE 1 | 1217 7TH ST, WASCO, CA 93280 | (661) 758-5500 | (661) 758-5511 |
| MALINI,IYENGAR - 250399 | | | | |
| Language(s): | | | | |
| HINDI | | Group Affiliation: | | |
| KANNADA | | | | |
| | OFFICE 1 | 6313 SCHIRRA CT STE 1, BAKERSFIELD, CA 93313 | (661) 323-6410 | (661) 633-3944 |
| | OFFICE 1 | 6313 SCHIRRA CT STE 1, BAKERSFIELD, CA 93313 | (661) 323-6410 | (661) 633-3944 |
| | OFFICE 2 | 8329 BRIMHALL RD BLD, BAKERSFIELD, CA 93312 | (661) 431-1555 | (661) 633-3944 |
| | OFFICE 2 | 8329 BRIMHALL RD BLD, BAKERSFIELD, CA 93312 | (661) 431-1555 | (661) 633-3944 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

MENTARI, MICHAEL C - 250507

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

MOTAMEDI GHAFAROKHI, NEDA - 250171

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------|----------------|----------------|
| OFFICE 1 | 1217 7TH ST, WASCO, CA 93280 | (661) 758-5500 | (661) 758-5511 |

NEHRA, VEDIKA - 250511

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3105 WILSON RD, BAKERSFIELD, CA 93304--531 | (661) 397-8775 | (661) 397-8286 |

ORTIZ, JAIME L - 250515

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 301 BRUNDAGE LN, BAKERSFIELD, CA 93304 | (661) 323-6086 | (661) 324-6301 |

PSYCHPLUS ASSOCIATES OF CALIFORNIA - 251077

Group Affiliation: PSYCHPLUS ASSOCIATES OF CALIFORNIA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|--|----------------|----------------|
| OFFICE 1 | 3095 TELEGRAPH AVE, BERKELEY, CA 94705 | (832) 869-4818 | (832) 241-2902 |
|----------|--|----------------|----------------|

SERBAN,VALERIA - 250523

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 2400 WIBLE RD STE 14, BAKERSFIELD, CA 93304 | (661) 835-1240 | (661) 835-4667 |

SONG SEO,FRANCO - 250400

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8329 BRIMHALL RD STE 804, BAKERSFIELD, CA 93312 | (661) 323-6410 | (661) 323-7631 |
| OFFICE 2 | 6313 SCHIRRA CT STE, BAKERSFIELD, CA 93313 | | |

SOSA,JUAN R - 250173

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|------------------------------|----------------|----------------|
| OFFICE 1 | 1217 7TH ST, WASCO, CA 93308 | (661) 758-5500 | (661) 758-5511 |

TAWA,TIMOTHY M - 250528

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------------|----------------|----------------|
| OFFICE 1 | 1945 N FINE STE 100, FRESNO, CA 93727 | (559) 457-5650 | (559) 457-5695 |

WALLACE,SUSAN L - 250532

Group Affiliation:

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--------------------------------------|----------------|----------------|
| OFFICE 1 | 7800 NILES ST, BAKERSFIELD, CA 93306 | (661) 328-4284 | (661) 616-9977 |

PSYCHOLOGY

CARD,JEANNE - 251079

Group Affiliation: KERN PSYCHIATRIC HEALTH AND WELLNESS CEN

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 8329 BRIMHALL RD STE 804, BAKERSFIELD, CA 93312 | (661) 431-1555 | (663) 381-7670 |

VALLEY PSYCHOLOGICAL GROUP - 250375

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 2100 E ST, BAKERSFIELD, CA 93301 | (661) 327-4252 | (661) 327-3409 |

WOLFSON,HEIDI NICOLE - 250955

Group Affiliation: VALLEY PSYCHOLOGICAL GROUP

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 2100 E ST, BAKERSFIELD, CA 93301 | (661) 327-4252 | (661) 327-3409 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

PULMONARY DISEASES

ASHRAF-ALIM,MUHAMMAD - 250013

Group Affiliation:

Language(s):

| HINDI | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| PUNJABI | OFFICE 1 | 3008 SILLECT AVE STE 140, BAKERSFIELD, CA 93308 | (661) 377-0091 | (661) 377-1715 |

AZIZ,HANY SAMIR - 251023

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

BANSAL,RUCHI - 250384

Group Affiliation:

Language(s):

| SPANISH | Office # | Street: | Phone: | Fax: |
|---------|----------|--|----------------|----------------|
| HINDI | OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | (661) 695-6777 | (845) 853-6738 |
| | OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-6910 | |

CHANDRASEKHAR,JAYARAMAN - 250025

Group Affiliation:

Language(s):

| HINDI | Office # | Street: | Phone: | Fax: |
|-------|----------|--|----------------|----------------|
| TAMIL | OFFICE 1 | 6001 TRUXTUN AVE STE 120A, BAKERSFIELD, CA 93309 | (661) 327-1352 | (661) 704-4238 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GOYAL,RAJAN - 250428

Group Affiliation:

Language(s):

| HINDI | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| PUNJABI | OFFICE 1 | 5531 BUSINESS PARK S STE 201, BAKERSFIELD, CA 93309 | (661) 324-7300 | (661) 324-7306 |

HANSA,SAHAPHUN N - 250074

Group Affiliation:

Language(s):

| THAI | Office # | Street: | Phone: | Fax: |
|------|----------|---|----------------|----------------|
| | OFFICE 1 | 3838 SAN DIMAS ST STE A250, BAKERSFIELD, CA 93301 | (661) 323-5300 | (661) 323-5455 |

HANY AZIZ MD INC,HANY SAMIR - 250377

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|--|----------------|----------------|
| | OFFICE 1 | 3805 SAN DIMAS ST STE B, BAKERSFIELD, CA 93301 | (661) 326-9999 | (661) 326-9011 |

**HARPEET SINGH SANDHU,HARPREET SINGH -
250143**

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|--|----------|-----------------------------------|----------------|----------------|
| | OFFICE 1 | 200 N G ST, PORTERVILLE, CA 93257 | (559) 788-0818 | (559) 788-0150 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

LAUGHLIN,ROBERT L - 250012

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A250, BAKERSFIELD, CA 93301 | (661) 323-5300 | (661) 323-5455 |

RAUF,KHALID - 250518

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

VAGHASIA,PRAMIL B - 250385

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | | (661) 695-6767 |
| OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-6910 | |

RADIATION ONCOLOGY

DESAI,AJAY S - 250421

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4500 MORNING DR STE 105, BAKERSFIELD, CA 93306 | (661) 491-5060 | (661) 871-3479 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

GORLA,GIRIDHAR REDDY - 250308

Group Affiliation:

Language(s):

HINDI

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6501 TRUXTUN AVE, BAKERSFIELD, CA 93309 | (661) 322-2206 | (661) 322-7027 |

GREENE,DAVID E - 251017

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5600 CALIFORNIA AVE STE 101, BAKERSFIELD, CA 93305 | (661) 322-2700 | (661) 427-4585 |
| OFFICE 2 | 300 OLD RIVER RD STE 120, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4587 |
| OFFICE 3 | 8605 CAMINO MEDIA STE 300, BAKERSFIELD, CA 93311 | (661) 322-2700 | (661) 427-4585 |

ISHIHARA,DAN - 250952

Group Affiliation:

Language(s):

JAPANESE

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 4500 MORNING DR STE 105, BAKERSFIELD, CA 93306 | (661) 491-5060 | (844) 742-2324 |

KURTZMAN,STEVEN M - 250995

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 6181 N THESTA AVE STE 104, FRESNO, CA 93710 | (559) 825-0300 | (559) 825-0301 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

RADIOLOGY

SOUTHERN CALIFORNIA VASCULAR INSTITUTE - 820289

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 110 NEW STINE RD, BAKERSFIELD, CA 93309 | (323) 347-1002 | (323) 433-9177 |

VISALIA IMAGING & OPEN MRI AND VISALIA W - 820407

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 1700 S COURT ST STE A, C & D, VISALIA, CA 93277 | (559) 734-5674 | (559) 734-1787 |

RHEUMATOLOGY

GUPTA,RINA BHARAT - 251080

Group Affiliation: CLINICA SIERRA VISTA

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |

HASAN,SYED A - 251018

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|----------------------------------|----------------|----------------|
| OFFICE 1 | 12560 BORON AVE, BORON, CA 93516 | (661) 874-4050 | (866) 572-7851 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

KIM,JIM C - 250004

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|-------------------------------------|----------------|----------------|
| KOREAN | Office # | Street: | Phone: | Fax: |
| CHINESE | OFFICE 1 | 2203 17TH ST, BAKERSFIELD, CA 93301 | (661) 716-0333 | (661) 716-1288 |

OHANIAN,ANI - 251020

Group Affiliation: BARTZ-ALTADONNA COMMUNITY HEALTH CENTER

Language(s):

| | | | | |
|--|-----------------|----------------------------------|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 12560 BORON AVE, BORON, CA 93516 | (661) 874-4050 | (866) 572-7851 |

SWE,KYAW K - 250956

Group Affiliation:

Language(s):

| | | | | |
|--|-----------------|---|----------------|----------------|
| | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301-2305 | (833) 678-2781 | (661) 368-0618 |

SLEEP STUDIES

ASHRAF-ALIM,MUHAMMAD - 250013

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|---|----------------|----------------|
| HINDI | Office # | Street: | Phone: | Fax: |
| PUNJABI | OFFICE 1 | 3008 SILLECT AVE STE 140, BAKERSFIELD, CA 93308 | (661) 377-0091 | (661) 377-1715 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

HARPEET SINGH SANDHU, HARPREET SINGH - 250143

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|-----------------------------------|----------------|----------------|
| OFFICE 1 | 200 N G ST, PORTERVILLE, CA 93257 | (559) 788-0818 | (559) 788-0150 |

RAUF, KHALID - 250518

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 625 34TH ST STE 100 & 200, BAKERSFIELD, CA 93301 | (833) 678-2781 | (661) 368-0618 |

SANDHU, AHANA - 250961

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | (661) 513-2471 | (661) 695-6767 |
| OFFICE 2 | 1205 GARCES HWY STE 203, DELANO, CA 93215 | (661) 395-6777 | (661) 695-6767 |

VAGHASIA, PRAMIL B - 250385

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 8305 BRIMHALL RD STE 1601, BAKERSFIELD, CA 93312 | | (661) 695-6767 |
| OFFICE 2 | 1205 GARCES HWY STE, DELANO, CA 93215 | (661) 725-6910 | |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

SURGERY CENTER (OUTPATIENT)

MILLENNIUM SURGERY CENTER - 820110

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3850 SAN DIMAS ST, BAKERSFIELD, CA 93301 | (661) 663-3700 | (661) 664-2533 |

MILLENNIUM SURGERY CENTER (FR) - 820088

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 3850 SAN DIMAS ST, BAKERSFIELD, CA 93301 | (661) 663-3700 | (661) 664-2533 |

SURGICAL ONCOLOGY

PUGALENTHI,AMUDHAN - 250085

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301 | (661) 665-0505 | (661) 864-2190 |

THORACIC SURGERY

PAW,PATRICK T - 250083

Group Affiliation:

Language(s):

| | Office # | Street: | Phone: | Fax: |
|---------|----------|---|----------------|----------------|
| THAI | | | | |
| CHINESE | OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|---|----------------|----------------|
| OFFICE 2 | 3838 SAN DIMAS ST STE B 201, BAKERSFIELD, CA 93301-1496 | (661) 321-3161 | (661) 321-3166 |
|----------|---|----------------|----------------|

PECK,ERIC A - 250084

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE A100, BAKERSFIELD, CA 93301 | (661) 327-8538 | (661) 327-5432 |

URGENT CARE

1ST CHOICE URGENT CARE - 820079

Group Affiliation: 1ST CHOICE URGENT CARE

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 4420 COFFEE RD STE A, BAKERSFIELD, CA 93308 | (661) 735-3041 | (661) 735-5692 |
| OFFICE 2 | 6324 PANAMA LN, BAKERSFIELD, CA 93313 | (661) 735-3041 | (661) 735-5692 |

ACCELERATED URGENT CARE - 820052

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 212 COFFEE RD, BAKERSFIELD, CA 93309 | (661) 885-6060 | (661) 885-6085 |
| OFFICE 2 | 9917 OLIVE DR, BAKERSFIELD, CA 93312 | (661) 695-9656 | |
| OFFICE 3 | 2400 K ST, BAKERSFIELD, CA 93301 | (661) 885-9909 | |
| OFFICE 4 | 9710 BRIMHALL RD, BAKERSFIELD, CA 93312 | (661) 829-6747 | (661) 829-6937 |
| OFFICE 5 | 4871 WHITE LN, BAKERSFIELD, CA 93309 | (661) 832-1679 | (661) 829-6937 |

DHGEM - Specialty & Ancillary Provider Roster

 Provider Specialty / Provider Name

MEMORIAL OCCUPATIONAL MED. & URGENT CARE - 820098

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3868 SAN DIMAS ST BLDG B-100, BAKERSFIELD, CA 93301 | (661) 326-0088 | (661) 861-0214 |

PRIME VALLEY URGENT CARE - 820121

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------------------------------|----------------|----------------|
| OFFICE 1 | 1004 14TH AVE, DELANO, CA 93215 | (661) 325-4089 | (559) 295-8606 |

SENDAS NORTHWEST URGENT CARE - 820047

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--------------------------------------|----------------|----------------|
| OFFICE 1 | 9450 MING AVE, BAKERSFIELD, CA 93311 | (661) 587-2500 | (661) 847-9912 |

SHAFTER URGENT CARE - 820061

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 501 MUNZER ST STE A, SHAFTER, CA 93263 | (661) 429-2739 | (855) 269-9568 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

STAT MD URGENT CARE - 251003

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 5701 YOUNG ST STE C201, BAKERSFIELD, CA 93311-8897 | (661) 464-5000 | (661) 336-9911 |

UROGYNECOLOGY

LEE,JUSTIN T - 250401

Group Affiliation:

Language(s):

VIETNAMESE

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

LEE,JUSTIN T - 250067

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 500 OLD RIVER RD STE 200, BAKERSFIELD, CA 93311 | (661) 663-6429 | (661) 663-6041 |

UROLOGY

DWIVEDI,RAJENDRA H - 250158

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 623 W PUTNAM AVE, PORTERVILLE, CA 93257 | (559) 781-2403 | (559) 781-4334 |

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

HOROVITZ,DAVID - 250410

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3941 SAN DIMAS ST STE 103A, BAKERSFIELD, CA 93301 | (661) 520-5010 | (661) 520-5020 |

OEFELEIN,MICHAEL G - 250405

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---|----------------|----------------|
| OFFICE 1 | 3941 SAN DIMAS ST STE 103A, BAKERSFIELD, CA 93301 | (661) 520-5010 | (661) 520-5020 |

SHAKIR,SHABBIR A - 250165

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 2808 F ST STE E, BAKERSFIELD, CA 93301 | (661) 395-0688 | (661) 395-3082 |

WAGUESPACK,ROBERT L - 250373

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|--|----------------|----------------|
| OFFICE 1 | 2530 F ST STE B, BAKERSFIELD, CA 93301 | (661) 321-3303 | (661) 321-3308 |

YOUNGSTROM,EDWIN A - 250089

Group Affiliation:

Language(s):

| Office # | Street: | Phone: | Fax: |
|----------|---------|--------|------|
|----------|---------|--------|------|

DHGEM - Specialty & Ancillary Provider Roster

Provider Specialty / Provider Name

| | | | |
|----------|---|----------------|----------------|
| OFFICE 1 | 3838 SAN DIMAS ST STE B231, BAKERSFIELD, CA 93301 | (661) 665-0505 | (661) 864-2190 |
| OFFICE 2 | 3838 SAN DIMAS ST STE, BAKERSFIELD, CA 93301 | (661) 654-0200 | (661) 664-2855 |

VASCULAR SURGERY

CAPOTE,ALLAN L - 250039

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--|----------------|----------------|
| SPANISH | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| | OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |

GILL,ZORA S - 250103

Group Affiliation:

Language(s):

| | | | | |
|---------|-----------------|--------------------------------------|----------------|----------------|
| HINDI | Office # | Street: | Phone: | Fax: |
| PUNJABI | OFFICE 1 | 901 OLIVE DR, BAKERSFIELD, CA 93308 | (661) 215-7500 | (661) 399-4224 |
| | OFFICE 2 | 5401 WHITE LN, BAKERSFIELD, CA 93309 | (661) 396-7100 | (661) 735-8901 |

QUMSIYEH,YAZEN H - 251040

Group Affiliation: HAO D BUI MD INC

Language(s):

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|--------|-----------------|--|----------------|----------------|
| ARABIC | Office # | Street: | Phone: | Fax: |
| | OFFICE 1 | 4901 CENTENNIAL PLAZA WAY, BAKERSFIELD, CA 93312 | (661) 387-8333 | (661) 241-4052 |
| | OFFICE 2 | 4825 COFFEE RD, BAKERSFIELD, CA 93308 | (661) 387-8333 | (661) 241-4052 |