

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--|--|---|
| FAMILY PRACTICE | | | |
| ASUNTO,JOEL M | 222 W HENDERSON AVE PORTERVILLE CA 93267 | 1410 S MOONEY BLVD VISALIA CA 93277 | 833 SEQUOIA AVE LINDSAY CA 93247 |
| Availability: OPEN | | | |
| Board Certified: FAMILY MEDICINE | Phone: (559) 784-5483 | (559) 635-1746 | (559) 562-1361 |
| Language(s): | Fax: (559) 784-5433 | (559) 784-5433 | (559) 784-5433 |
| Gender Affirming Care: No | | | |
| Group Affiliation: ERICK MADRIGAL MD MBA INC | | | |
| AVILA,VANESA | 1110 W VISALIA RD STE 102 EXETER CA 93221 | | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (866) 707-6664 | | |
| Language(s): SPANISH | Fax: (661) 746-9197 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| BAUTISTA,LUIS G | 2505 MERCED ST FRESNO CA 93721-1811 | 1530 E. MANNING AVE REEDLEY CA 93654-2346 | 3748 E SHIELD AVE FRESNO CA 93726-7028 |
| Availability: CLOSED TO MEDI-CAL | | | |
| Board Certified: YES | Phone: (866) 707-6664 | (866) 707-6664 | (866) 707-6664 |
| Language(s): SPANISH | Fax: (661) 746-9197 | (661) 746-9197 | (661) 746-9197 |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| BUENROSTRO,JOSE IGNACIO | 733 3RD ST MCFARLAND CA 93250 | | |
| Availability: OPEN | | | |

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| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--|---|------------------|
| Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | Phone: (661) 792-3097 Fax: (661) 792-3095 | | |
| CAMPOS,JOSE L | 1101 N CHERRY ST | 1500 W TULARE AVE | |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | TULARE CA 93274 Phone: (559) 686-9097 Fax: (559) 684-7060 | TULARE CA 93274 (559) 686-9097 (559) 366-7060 | |
| CASTRO,IRMA YOLANDA | 733 3RD ST | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: Language(s): SPANISH Gender Affirming Care: No Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | MCFARLAND CA 93250 Phone: (661) 792-3097 Fax: (661) 792-3095 | | |
| CRUZ,BRYAN P | 1101 N CHERRY ST | 16686 ROAD 168 | |
| Availability: CLOSED TO MEDI-CAL Board Certified: | TULARE CA 93274 Phone: (559) 686-9097 | WOODVILLE CA 93257 (559) 686-9097 | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|---|
| Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | Fax: (559) 366-7060 | (559) 366-1022 | |
| HASHMAT,FAHAD | 100 WILLOW PLAZA PL STE 305 | | |
| Availability: OPEN Board Certified: YES Language(s): URDU Gender Affirming Care: No Group Affiliation: VISALIA FAMILY MEDICINE GROUP INC | VISALIA CA 93291 Phone: (559) 741-9034 Fax: (559) 741-9053 | | |
| IDELSHON,BRADLEY C | 12683 AVE 416 | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: NO Language(s): SPANISH Gender Affirming Care: No Group Affiliation: SAN JOAQUIN FAMILY HEALTHCARE ASSOCIATIO | OROSI CA 93647 Phone: (559) 528-4717 Fax: (559) 528-0302 | | |
| KALEKA,KEVIN V | 2057 HIGH STREET | 12572 AVENUE 416 STE | 420 E EL MONTE WAY |
| Availability: OPEN Board Certified: YES Language(s): | SELMA CA 93662 Phone: (559) 891-3100 Fax: (559) 891-7827 | OROSI CA 93647 (559) 528-4779 (559) 528-3349 | DINUBA CA 93618 (559) 595-9500 (559) 595-9039 |

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| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-----------------------|-------------------|------------------|
| Gender Affirming Care: No Group Affiliation: FAMILY HEALTH CENTERS INC | | | |
| KELLOGG,KORNELIA R | 1101 N CHERRY ST | | |
| Availability: CLOSED TO MEDI-CAL | TULARE CA 93274 | | |
| Board Certified: YES | Phone: (559) 686-9097 | | |
| Language(s): | Fax: (559) 684-7060 | | |
| Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | | | |
| KOTHARY,HEMMAL SHASHIKANT | 1500 6TH AVE | | |
| Availability: OPEN | DELANO CA 93215 | | |
| Board Certified: YES | Phone: (661) 725-1010 | | |
| Language(s): SPANISH | Fax: (661) 725-6940 | | |
| Gender Affirming Care: No Group Affiliation: | | | |
| KUMAR,RAVI I | 1101 N CHERRY ST | | |
| Availability: CLOSED TO MEDI-CAL | TULARE CA 93274 | | |
| Board Certified: YES | Phone: (559) 686-9097 | | |
| Language(s): | Fax: (559) 684-7060 | | |
| Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | | | |

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| MACIAS,LEA A | 311 W NOBLE AVE VISALIA CA 93277 | 1110 W VISALIA RD STE EXETER CA 93221 | 4646 N 1ST ST FRESNO CA 93726 |
| Availability: CLOSED TO MEDI-CAL | | | |
| Board Certified: YES | Phone: (866) 707-6664 | (866) 707-6664 | (866) 707-6664 |
| Language(s): SPANISH | Fax: (661) 746-9197 | (661) 746-9197 | (661) 746-9197 |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| MADRIGAL,ERICK M | 833 SEQUOIA AVE LINDSAY CA 93247 | 222 W HENDERSON AVE PORTERVILLE CA 93257 | 1410 S MOONEY BLVD VISALIA CA 93277 |
| Availability: CLOSED TO MEDI-CAL | | | |
| Board Certified: NO | Phone: (559) 562-1361 | (559) 784-5483 | (559) 635-3011 |
| Language(s): | Fax: (559) 784-5433 | (559) 784-5433 | (559) 784-5433 |
| Gender Affirming Care: No | | | |
| Group Affiliation: ERICK MADRIGAL MD MBA INC | | | |
| MATIN,TAHMORES | 833 SEQUOIA AVE LINDSAY CA 93247 | | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (559) 562-1361 | | |
| Language(s): PERSIAN | Fax: (559) 784-5433 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ERICK MADRIGAL M.D., M.B.A, INC. | | | |
| MCLEMORE,CHRISTINE M | 1133 N CHELSEA ST RIDGECREST CA 93555 | 161 N MILL ST TEHACHAPI CA 93561 | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (866) 707-6664 | (866) 707-6664 | |

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| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|---|--|
| Language(s): Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | Fax: (661) 759-2222 | (661) 759-2222 | |
| MENDOZA,ANNA L | 1230 JEFFERSON ST DELANO CA 93215 | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL MD MBA INC | Phone: (661) 725-7793 Fax: (661) 370-3911 | | |
| NERIA,GUADALUPE A | 1410 S MOONEY BLVD VISALIA CA 93277 | 833 SEQUOIA AVE LINDSAY CA 93247 | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL MD MBA INC | Phone: (559) 635-1746 Fax: (559) 784-5433 | (559) 562-1361 (559) 784-5433 | |
| NERIA,JERRY A | 833 SEQUOIA AVE LINDSAY CA 93247 | 222 W HENDERSON AVE PORTERVILLE CA 93257 | 1410 S MOONEY BLVD VISALIA CA 93277 |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL MD MBA INC | Phone: (559) 562-1361 Fax: (559) 784-5430 | (559) 784-5483 (559) 789-9828 | (559) 635-1746 (559) 784-5433 |

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|--|-------------------------|-------------------|------------------|
| OCHOA,MARIO A | 101 N PALM ST | | |
| Availability: CLOSED TO MEDI-CAL | WOODLAKE CA 93286 | | |
| Board Certified: YES | Phone: (559) 564-1100 | | |
| Language(s): SPANISH | Fax: (559) 564-1101 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ERICK MADRIGAL MD MBA INC | | | |
| OCHOA,MARIO A | 3275 MCCALL AVE STE 102 | | |
| Availability: CLOSED TO MEDI-CAL | SELMA CA 93662 | | |
| Board Certified: YES | Phone: (559) 896-3808 | | |
| Language(s): SPANISH | Fax: (559) 896-3875 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OCHOA FAMILY CLINIC INC | | | |
| PUENTE-MORENO,JOSE G | 1101 N CHERRY ST | | |
| Availability: OPEN | TULARE CA 93274 | | |
| Board Certified: | Phone: (559) 686-9097 | | |
| Language(s): | Fax: (559) 684-7060 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | | | |
| RANGEL OROZCO,DANIELA | 833 SEQUOIA AVE | | |
| Availability: CLOSED TO MEDI-CAL | LINDSAY CA 93247 | | |

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|--|---|--|------------------|
| Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL MD MBA INC | Phone: (559) 562-1361 Fax: (559) 784-5433 | | |
| RIVERA, MARK J | 222 W HENDERSON AVE | 833 SEQUOIA AVE | |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL MD MBA INC | PORTERVILLE CA 93257 Phone: (559) 784-5483 Fax: (559) 784-5433 | LINDSAY CA 93247 (559) 784-5483 (559) 784-5433 | |
| RIVERA, MARK JEFFERSON VILAR | 1507 PANAMA LN STE G100 | | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | BAKERSFIELD CA 93307-5862 Phone: (866) 707-6664 Fax: (661) 746-9197 | | |
| RUVALCABA, ALBERTO | 40657 ROAD 128 | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: Language(s): SPANISH Gender Affirming Care: No | CUTLER CA 93615 Phone: (559) 390-0023 Fax: (559) 426-6069 | | |

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| Group Affiliation: CHERRY CLINIC | | | |
| SABOUR, ABDELMAJID | 1507 PANAMA LN STE G100 | 277 E FRONT ST | |
| Availability: CLOSED TO MEDI-CAL | BAKERSFIELD CA 93307-5862 | BUTTONWILLOW CA 93206 | |
| Board Certified: FAMILY MEDICINE | Phone: (866) 707-6664 | (866) 707-6664 | |
| Language(s): | Fax: (661) 746-9197 | (661) 746-9197 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| Group Affiliation: CHERRY CLINIC | | | |
| SANCHEZ JR, ROGELIO | 1500 6TH AVE | | |
| Availability: CLOSED TO MEDI-CAL | DELANO CA 93215 | | |
| Board Certified: FP | Phone: (661) 725-1010 | | |
| Language(s): SPANISH | Fax: (661) 725-1117 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: NORTH KERN SOUTH TULARE HOSPITAL DISTRIC | | | |
| Group Affiliation: CHERRY CLINIC | | | |
| SARVA, RAMYA M | 912 FREMONT ST | 1014 CALLOWAY DR | 1022 CALLOWAY DR |
| Availability: OPEN | DELANO CA 93215 | BAKERSFIELD CA 93312 | BAKERSFIELD CA 93312 |
| Board Certified: YES | Phone: (866) 707-6664 | (866) 707-6664 | (866) 707-6664 |
| Language(s): HINDI | Fax: (661) 459-1974 | (661) 746-9197 | (661) 746-9197 |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| Group Affiliation: CHERRY CLINIC | | | |
| VANEGAS, ALVIN E | 1110 W VISALIA RD | | |

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| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | EXETER CA 93221 Phone: (866) 707-6664 Fax: (661) 746-9197 | | |
| VEERAPPA,NANDEESH Availability: OPEN Board Certified: NO Language(s): Gender Affirming Care: No Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | 733 3RD ST MCFARLAND CA 93250 Phone: (661) 792-3097 Fax: (661) 792-3095 | | |
| VELASCO,OSCAR L Availability: CLOSED Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: VELASCO, OSCAR L | 560 W PUTNAM AVE STE 5 PORTERVILLE CA 93257 Phone: (559) 781-4007 Fax: (559) 783-9454 | | |
| YAQUB,TAHIR Availability: OPEN Board Certified: YES Language(s): PUNJABI | 733 3RD ST MCFARLAND CA 93250 Phone: (661) 792-3097 Fax: (661) 792-3095 | | |

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|--|-----------------------|-------------------|------------------|
| Gender Affirming Care: No | | | |
| Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | | | |
| ZOGHBI, MARWAN | 3632 W PACKWOOD AVE | | |
| Availability: | VISALIA CA 93277 | | |
| Board Certified: | Phone: (559) 734-6701 | | |
| Language(s): | Fax: (559) 732-3211 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: MARWAN ZOGHBI MD INC | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---------------------------------------|-------------------------------------|------------------|
| GENERAL PRACTICE | | | |
| GARCIA,RAYNADO F | 1159 N CHERRY ST TULARE CA 93274 | | |
| Availability: OPEN | | | |
| Board Certified: | Phone: (559) 684-7700 | | |
| Language(s): TAGALOG | Fax: (559) 684-7707 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: | | | |
| MOLINA,ARTHUR | 101 N PALM ST WOODLAKE CA 93286 | 833 SEQUOIA AVE LINDSAY CA 93247 | |
| Availability: CLOSED TO MEDI-CAL | | | |
| Board Certified: | Phone: (559) 564-1100 | (559) 784-5483 | |
| Language(s): | Fax: (559) 564-1101 | (559) 784-5433 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ERICK MADRIGAL MD MBA INC | | | |
| NARAYAN,ANAND | 317 W EL MONTE WAY DINUBA CA 93618 | | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (559) 591-6200 | | |
| Language(s): SPANISH | Fax: (559) 591-2724 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: ANAND NARAYAN MD INC | | | |
| PETERS,JACOB K | 750 G ST REEDLEY CA 93654 | | |
| Availability: OPEN | | | |

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|---|---|-------------------|------------------|
| Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: REEDLEY WELLNESS CENTER, MD | Phone: (559) 637-9818 Fax: (559) 637-9910 | | |
| RATNAYAKE,SAMAN N | 565 N THOMPSON RD | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: Language(s): Gender Affirming Care: No Group Affiliation: TIPTON MEDICAL CLINIC | TIPTON CA 93272 Phone: (559) 752-4147 Fax: (559) 752-4150 | | |
| SALMASSI,SADEGH | 1205 GARCES HWY STE 306 | | |
| Availability: OPEN Board Certified: YES Language(s): PERSIAN Gender Affirming Care: No Group Affiliation: S SALMASSI MD INC | DELANO CA 93215 Phone: (661) 725-5877 Fax: (661) 725-4636 | | |
| ZAPANTA,DON VICTOR A | 1419 MAIN ST | | |
| Availability: OPEN Board Certified: Language(s): SPANISH Gender Affirming Care: No | DELANO CA 93215 Phone: (661) 721-9001 Fax: (661) 721-1516 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
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|------------------------------------|-----------------|-------------------|------------------|

Group Affiliation: DON VICTOR A
ZAPANTA

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
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|------------------------------------|-----------------|-------------------|------------------|

INTERNAL MEDICINE

AL NAHHAL,RAMY I 1230 JEFFERSON ST
 DELANO CA 93215
 Availability: CLOSED TO MEDI-CAL
 Board Certified: YES Phone: (661) 725-7793
 Language(s): ARABIC Fax: (661) 725-0595
 Gender Affirming Care: No
 Group Affiliation: FAMILY HEALTHCARE NETWORK

BANSAL,ANUJ 323 S LEXINGTON ST
 DELANO CA 93215
 Availability: OPEN
 Board Certified: Phone: (661) 718-4980
 Language(s): Fax: (661) 778-0019
 Gender Affirming Care: No
 Group Affiliation: ANUJ BANSAL MD INC

BANSAL,RADHEY S 1230 JEFFERSON ST
 DELANO CA 93215
 Availability: OPEN
 Board Certified: YES Phone: (661) 725-7793
 Language(s): PUNJABI Fax: (661) 370-3911
 Gender Affirming Care: No
 Group Affiliation: FAMILY HEALTHCARE NETWORK

BHASKAR,SHYAM
 Availability: CLOSED TO MEDI-CAL

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| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|--|--|------------------|
| Board Certified: IM Language(s): TAMIL Gender Affirming Care: No Group Affiliation: SHYAM BHASKAR, MD | Phone: Fax: | | |
| CHOPRA,JATINDER | 858 N CHERRY ST STE E | | |
| Availability: CLOSED TO MED-CAL Board Certified: YES Language(s): PUNJABI Gender Affirming Care: No Group Affiliation: AVENAL COMMUNITY HEALTH CENTER | TULARE CA 93274 Phone: (559) 686-4766 Fax: (559) 686-2016 | | |
| COMMUNITY HEALTH CENTERS OF AMERICA | 733 3RD ST | | |
| Availability: OPEN Board Certified: Language(s): Gender Affirming Care: No Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | MCFARLAND CA 93250 Phone: (661) 792-3097 Fax: (661) 792-3095 | | |
| DHILLON,SARTAJ K | 591 W PUTNAM AVE | 229 W CHERRY AVE | |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): | PORTERVILLE CA 93257 Phone: (559) 784-5717 Fax: (559) 784-2443 | PORTERVILLE CA 93257 (559) 789-0277 (877) 480-4802 | |

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| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|--|---|
| Gender Affirming Care: No Group Affiliation: AVENAL COMMUNITY HEALTH CENTER | | | |
| DHIMAN,JAY | 277 E FRONT ST BUTTONWILLOW CA 93206 | 1100 4TH ST BLDG A TAFT CA 93268 | 3409 CALLOWAY DR BAKERSFIELD CA 93312 |
| Availability: OPEN | Phone: (866) 707-6664 | (866) 707-6664 | (866) 707-6664 |
| Board Certified: YES | Fax: (661) 746-9197 | (661) 746-9197 | (661) 746-9197 |
| Language(s): | | | |
| Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | | | |
| GUTIERREZ,OSVALDO N | 833 SEQUOIA AVE LINDSAY CA 93247 | 1410 S MOONEY BLVD VISALIA CA 93277 | 222 W HENDERSON AVE PORTERVILLE CA 93257 |
| Availability: CLOSED TO MEDI-CAL | Phone: (559) 562-1361 | (559) 635-1746 | (559) 784-5483 |
| Board Certified: NO | Fax: (559) 784-5433 | (559) 784-5433 | (559) 784-5433 |
| Language(s): SPANISH | | | |
| Gender Affirming Care: No Group Affiliation: ERICK MADRIGAL M.D., M.B.A, INC. | | | |
| HASNAIN,ABBAS S | 9520 ROAD 238 TERRA BELLA CA 93270 | | |
| Availability: OPEN | Phone: (559) 544-6815 | | |
| Board Certified: | Fax: (559) 544-6820 | | |
| Language(s): HINDI | | | |
| Gender Affirming Care: No | | | |

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|------------------------------------|-----------------|-------------------|------------------|

Group Affiliation: SIERRA VIEW LOCAL
HEALTH CARE
DISTRICT

HASNAIN,ABBAS S

1500 6TH AVE

Availability: CLOSED TO MEDI-CAL

DELANO CA 93215

Board Certified:

Phone: (661) 725-1010

Language(s): PUNJABI

Fax: (661) 725-6940

Gender Affirming Care: No

Group Affiliation: NORTH KERN SOUTH
TULARE HOSPITAL
DISTRIC

HAYES JR,JOSEPH L

4900 CALIFORNIA AVE STE 100B

Availability: OPEN

BAKERSFIELD CA 93309

Board Certified: SL

Phone: (866) 707-6664

Language(s):

Fax: (661) 746-9197

Gender Affirming Care: No

Group Affiliation: OMNI FAMILY
HEALTH

LIBERSTEN,ALLA

380 N RESERVATION ROAD

Availability: CLOSED TO MEDI-CAL

PORTERVILLE CA 93257

Board Certified: YES

Phone:

Language(s):

Fax:

Gender Affirming Care: No

Group Affiliation: TULE RIVER INDIAN
HEALTH CENTER INC

DHIMGT Primary Care Physician Roster

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|--|-----------------------|-------------------|------------------|
| MEHDIPOUR,AHMAD | 733 3RD ST | | |
| Availability: CLOSED TO MEDI-CAL | MCFARLAND CA 93250 | | |
| Board Certified: IM | Phone: (661) 792-3097 | | |
| Language(s): ARABIC | Fax: (661) 792-3095 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | | | |
| MODI,PRITI | 733 3RD ST | | |
| Availability: CLOSED TO MEDI-CAL | MCFARLAND CA 93250 | | |
| Board Certified: IM | Phone: (661) 792-3097 | | |
| Language(s): GUJARATI | Fax: (661) 792-3095 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | | | |
| PATEL,NIRAJ MAVJIBHAI | 927 CENTER ST | | |
| Availability: CLOSED TO MEDI-CAL | PIXLEY CA 93256 | | |
| Board Certified: YES | Phone: (559) 737-4700 | | |
| Language(s): GUJARATI | Fax: (559) 734-1247 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: FAMILY HEALTHCARE NETWORK | | | |
| PATEL,VIJAYKUMAR B | 1230 JEFFERSON ST | | |

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|---|--|---|------------------|
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: FAMILY HEALTHCARE NETWORK | DELANO CA 93215 Phone: (661) 725-7793 Fax: (661) 370-3911 | | |
| RAHAL,SIMRITA | 9802 STOCKDALE HWY STE 102 | 1205 GARCES HWY STE | |
| Availability: OPEN Board Certified: NO Language(s): PUNJABI Gender Affirming Care: No Group Affiliation: PARAMVIR S RAHAL MD INC | BAKERSFIELD CA 93311 Phone: (661) 323-1200 Fax: (661) 323-1204 | DELANO CA 93215 (661) 721-1200 (661) 721-1204 | |
| RAMOS GARCIA,RAQUEL V | 1101 N CHERRY ST | 1500 W TULARE DR | |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | TULARE CA 93274 Phone: (559) 686-9097 Fax: (559) 684-7060 | TULARE CA 93274 (559) 686-9097 (559) 366-7060 | |
| RATNAYAKE,SAMANTHA N | 565 N THOMPSON RD | | |
| Availability: OPEN Board Certified: YES Language(s): | TIPTON CA 93272 Phone: (559) 752-4147 Fax: (559) 752-4150 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|--|--|
| Gender Affirming Care: No Group Affiliation: TIPTON MEDICAL CLINIC | | | |
| SINGH,PREETINER | 733 3RD ST MCFARLAND CA 93250 | | |
| Availability: OPEN | Phone: (661) 792-3097 | | |
| Board Certified: YES | Fax: (661) 792-3095 | | |
| Language(s): HINDI | | | |
| Gender Affirming Care: No Group Affiliation: COMMUNITY HEALTH CENTERS OF AMERICA | | | |
| UPPLE,CHARNPREET | 4600 PANAMA LN STE 102B BAKERSFIELD CA 93313 | | |
| Availability: OPEN | Phone: (866) 707-6664 | | |
| Board Certified: | Fax: (661) 746-9197 | | |
| Language(s): | | | |
| Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | | | |
| WATANAKUNAKOM,PAUL W | 465 W PUTNAM AVE PORTERVILLE CA 93257 | 400 W MINERAL KING AVE VISALIA CA 93291 | 263 PEARSON DR PORTERVILLE CA 93257 |
| Availability: OPEN | Phone: (559) 784-1110 | (559) 624-2000 | (559) 784-1110 |
| Board Certified: YES | Fax: | | |
| Language(s): | | | |
| Gender Affirming Care: No | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

Group Affiliation: PORTERVILLE
COMMUNITY
PHYSICIANS INC

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|-----------------------|-------------------|------------------|
| MULTI-SPECIALTY GROUP | | | |
| CLINICA AGUA VIVA LINDSAY | 833 SEQUOIA AVE | | |
| Availability: CLOSED TO COMMERCIAL | LINDSAY CA 93247 | | |
| Board Certified: | Phone: (559) 784-5483 | | |
| Language(s): | Fax: (559) 784-5433 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: | | | |
| FAMILY HEALTHCARE NETWORK | | | |
| FAMILY HEALTHCARE NETWORK | 1230 JEFFERSON ST | | |
| Availability: | DELANO CA 93215 | | |
| Board Certified: | Phone: (661) 725-7793 | | |
| Language(s): | Fax: (661) 370-3911 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: FAMILY HEALTHCARE NETWORK | | | |
| FAMILY HEALTHCARE NETWORK | | | |
| FAMILY HEALTHCARE NETWORK | 927 CENTER ST | | |
| Availability: | PIXLEY CA 93256 | | |
| Board Certified: | Phone: (559) 737-4700 | | |
| Language(s): | Fax: (559) 734-1247 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: FAMILY HEALTHCARE NETWORK | | | |
| SHYAM BHASKAR MD | | | |
| SHYAM BHASKAR MD | 1425 MAIN ST | | |
| Availability: OPEN TO MEDI-CAL | DELANO CA 93215 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|-----------------------|-------------------|------------------|
| Board Certified: | Phone: (661) 778-0920 | | |
| Language(s): | Fax: (661) 778-0919 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: SHYAM BHASKAR, MD | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|---|--------------------------------------|-------------------------------------|
| PEDIATRICS | | | |
| AMU SIERRA,JAVIER | 1093 11TH ST REEDLEY CA 93654 | | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (559) 743-7340 | | |
| Language(s): SPANISH | Fax: (559) 743-7395 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: JAVIER AMU MD PROFESSIONAL CORPORATION, | | | |
| BENINCORE ROBLEDO,ANDRES | 1134 E CARTMILL AVE BLDG A TULARE CA 93274 | 16686 ROAD 168 WOODVILLE CA 93257 | 1500 W TULARE DR TULARE CA 93274 |
| Availability: OPEN | | | |
| Board Certified: | Phone: (559) 686-9097 | (559) 686-9097 | (559) 686-9097 |
| Language(s): | Fax: (559) 556-0083 | (559) 366-1022 | (559) 366-7060 |
| Gender Affirming Care: No | | | |
| Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | | | |
| BUTTAN,POONAM G | 166 N VILLA ST PORTERVILLE CA 93257 | | |
| Availability: OPEN | | | |
| Board Certified: NO | Phone: (559) 782-0581 | | |
| Language(s): HINDI | Fax: (559) 782-1163 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: POONAM BUTTAN MD | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|---|--|
| DE LA CRUZ - SANTAMARIA,RODRIGO J Availability: OPEN Board Certified: Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | 3035 E BARDSLEY AVE TULARE CA 93274 Phone: (559) 686-9097 Fax: (559) 687-1037 | 1134 E CARTMILL AVE BLDG A TULARE CA 93274 (559) 686-9097 (559) 556-0083 | 1500 W TULARE DR TULARE CA 93274 (559) 686-9097 (559) 366-7060 |
| ESKIF-DABBAGH,BAKRI Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | 1134 E CARTMILL AVE BLDG A TULARE CA 93274 Phone: (559) 686-9097 Fax: (559) 366-0083 | 1500 W TULARE DR TULARE CA 93274 (559) 686-9097 (559) 366-7060 | 3035 E BARDSLEY AVE TULARE CA 93274 (559) 686-9097 (559) 687-1037 |
| FERRER,MARIA L Availability: OPEN Board Certified: Language(s): SPANISH Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | 912 FREMONT ST DELANO CA 93280 Phone: (866) 707-6664 Fax: (661) 746-9197 | | |
| GEHLAWAT,DILBAGH S | 912 FREMONT ST | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|-------------------|------------------|
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): HINDI Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | DELANO CA 93215 Phone: (866) 707-6664 Fax: (661) 459-1974 | | |
| GU,HUIYING | 1922 S COURT ST | | |
| Availability: OPEN Board Certified: YES Language(s): CHINESE Gender Affirming Care: No Group Affiliation: BRIGHT PEDIATRICS AND ECHOCARDIOGRAPHY | VISALIA CA 93277 Phone: (559) 625-0888 Fax: (559) 625-0688 | | |
| HAYES JR,JOSEPH L | 4900 CALIFORNIA AVE STE 100B | | |
| Availability: OPEN Board Certified: SL Language(s): Gender Affirming Care: No Group Affiliation: OMNI FAMILY HEALTH | BAKERSFIELD CA 93309 Phone: (866) 707-6664 Fax: (661) 746-9197 | | |
| HWANG,AURORA GRACE E | 835 N SEQUOIA AVE | | |
| Availability: OPEN Board Certified: NO | LINDSAY CA 93247 Phone: (559) 562-5177 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------|------------------|
| Language(s): TAGALOG Gender Affirming Care: No Group Affiliation: A. GRACE E HWANG MD | Fax: (559) 562-9284 | | |
| HWANG,AURORA GRACE E | 41689 ROAD 128 | | |
| Availability: OPEN Board Certified: NO Language(s): TAGALOG Gender Affirming Care: No Group Affiliation: GREEN VALLEY MEDICAL CORPORATION | OROSI CA 93647 Phone: (559) 528-1777 Fax: (559) 528-1778 | | |
| LOPEZ,SARAH A | 1062 N CHERRY ST | | |
| Availability: OPEN Board Certified: PD Language(s): Gender Affirming Care: No Group Affiliation: PEDIATRIC MEDICAL ASSOCIATES OF SACRAMEN | TULARE CA 93274 Phone: (559) 686-3824 Fax: (559) 686-3741 | | |
| MEHRETAB-ROMAN,YOHANNA A | 912 FREMONT ST | | |
| Availability: OPEN Board Certified: YES Language(s): SPANISH Gender Affirming Care: No | DELANO CA 93215 Phone: (866) 707-6664 Fax: (661) 459-1974 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|--------------------------|
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| MENESES-SAMSON,DOROTHY B | 860 SEQUOIA AVE LINDSAY CA 93247 | | |
| Availability: OPEN | | | |
| Board Certified: | Phone: (866) 707-6664 | | |
| Language(s): | Fax: (661) 746-9197 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| MENESES-SAMSON,DOROTHY B | 1110 W VISALIA RD STE 102 EXETER CA 93221 | 1110 W VISALIA RD STE EXETER CA 93221 | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (866) 707-6664 | (866) 707-6664 | |
| Language(s): TAGALOG | Fax: (661) 237-6889 | (661) 237-6889 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| NGUYEN,DIEM NGOC | 726 MEDICAL CENTER DR E STE 209 CLOVIS CA 93611 | 215 N FRESNO ST STE 370 FRESNO CA 93701 | |
| Availability: | | | |
| Board Certified: | Phone: (559) 325-5656 | (559) 459-2327 | |
| Language(s): | Fax: (559) 325-5568 | (559) 459-1539 | |
| Gender Affirming Care: No | | | |
| Group Affiliation: COMMUNITY HEALTH PARTNERS | | | |
| NGUYEN,THACH BAO JONATHAN | 9508 STOCKDALE HWY STE 150 | 1215 34TH ST | 300 OLD RIVER RD STE 105 |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|--|--|
| Availability: CLOSED Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: COASTAL KIDS A PROFESSIONAL MEDICAL CORP | BAKERSFIELD CA 93311 Phone: (661) 663-7500 Fax: (661) 663-7503 | BAKERSFIELD CA 93301 (661) 663-4700 (661) 489-3338 | BAKERSFIELD CA 93311 (661) 663-4700 (661) 663-4740 |
| ORTH,ROBERT L | 1062 N CHERRY ST TULARE CA 93274 | 1008 N CHERRY ST TULARE CA 93274 | |
| Availability: OPEN Board Certified: PD Language(s): Gender Affirming Care: No Group Affiliation: PEDIATRIC MEDICAL ASSOCIATES OF SACRAMEN | Phone: (559) 686-3824 Fax: (559) 686-3741 | (559) 688-5437 (559) 688-8346 | |
| PALOMAKI,MARY BETH | 1134 E CARTMILL AVE BLDG A TULARE CA 93274 | 1500 W TULARE DR TULARE CA 93274 | 3035 E BARDSLEY AVE TULARE CA 93274 |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | Phone: (559) 686-9097 Fax: (559) 556-0083 | (559) 686-9097 (559) 366-7060 | (559) 686-9097 (559) 687-1037 |
| PETERS,JACOB K | 750 G ST REEDLEY CA 93654 | | |
| Availability: OPEN | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|--|--|-------------------|------------------|
| Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: REEDLEY WELLNESS CENTER, MD | Phone: (559) 637-9818 Fax: (559) 637-9910 | | |
| RAO,ANURADHA | 912 FREMONT ST | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: YES Language(s): SPANISH Gender Affirming Care: No Group Affiliation: | DELANO CA 93215 Phone: (866) 707-6664 Fax: (661) 746-9197 | | |
| RAVI,USHA | 1062 N CHERRY ST | | |
| Availability: OPEN Board Certified: YES Language(s): HINDI Gender Affirming Care: No Group Affiliation: PEDIATRIC MEDICAL ASSOCIATES | TULARE CA 93274 Phone: (559) 686-3824 Fax: (559) 686-3741 | | |
| RESA,RAMON | 569 W PUTNAM AVE | | |
| Availability: CLOSED TO MEDI-CAL Board Certified: Language(s): SPANISH Gender Affirming Care: No | PORTERVILLE CA 93257 Phone: (559) 781-9301 Fax: (559) 782-7639 | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|----------------------------|--------------------|----------------------------|
| Group Affiliation: AVENAL COMMUNITY HEALTH CENTER | | | |
| ROCHA-MILLAN,JORGE | 1500 W TULARE DR | 16686 ROAD 168 | 1134 E CARTMILL AVE BLDG A |
| Availability: OPEN | TULARE CA 93274 | WOODVILLE CA 93257 | TULARE CA 93274 |
| Board Certified: | Phone: (559) 686-9097 | (559) 686-9097 | (555) 968-6909 |
| Language(s): | Fax: (559) 366-7060 | (559) 366-1022 | (559) 556-0083 |
| Gender Affirming Care: No | | | |
| Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | | | |
| RUERAS,MARIA CECILIA M | 9508 STOCKDALE HWY STE 150 | | |
| Availability: OPEN | BAKERSFIELD CA 93311 | | |
| Board Certified: YES | Phone: (661) 663-7500 | | |
| Language(s): TAGALOG | Fax: (661) 663-3063 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: COASTAL KIDS A PROFESSIONAL MEDICAL CORP | | | |
| RUIZ-RIVERA,JORGE A | 1134 E CARTMILL AVE BLDG A | 1500 W TULARE DR | 3035 E BARDSLEY AVE |
| Availability: OPEN | TULARE CA 93274 | TULARE CA 93274 | TULARE CA 93274 |
| Board Certified: YES | Phone: (559) 686-9097 | (559) 686-9097 | (559) 686-9097 |
| Language(s): | Fax: (559) 556-0083 | (559) 366-7060 | (559) 687-1037 |
| Gender Affirming Care: No | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------|-------------------|------------------|
|------------------------------------|-----------------|-------------------|------------------|

Group Affiliation: ALTURA CENTERS
FOR HEALTH -
CHERRY ST

RUSCH, MARIA T

1077 W MORTON AVE STE 101

Availability: OPEN

PORTERVILLE CA 93257

Board Certified: YES

Phone: (559) 781-5022

Language(s): TAGALOG

Fax: (559) 781-6990

Gender Affirming Care: No

 Group Affiliation: M THERESA RUSCH
MD INC

SEJAR, LYNDON ANDAYA

1100 BEAR MOUNTAIN BLVD

Availability:

ARVIN CA 93203

Board Certified:

Phone: (661) 319-1101

Language(s):

Fax: (661) 459-3535

Gender Affirming Care: No

 Group Affiliation: VANGUARD MEDICAL
CORPORATION

SHAH, ASIT V

1062 N CHERRY ST

Availability: OPEN

TULARE CA 93274

Board Certified: PD

Phone: (559) 686-3824

Language(s): HINDI

Fax: (559) 686-3741

Gender Affirming Care: No

 Group Affiliation: PEDIATRIC MEDICAL
ASSOCIATES OF
SACRAMEN

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------|------------------|
| TAVEROS, MEL CLARK R | 1500 6TH AVE DELANO CA 93215 | | |
| Availability: OPEN | | | |
| Board Certified: YES | Phone: (661) 725-1010 | | |
| Language(s): TAGALOG | Fax: (661) 725-6940 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: NORTH KERN SOUTH TULARE HOSPITAL DISTRIC | | | |
| VERMA, PREETI | 1530 E MANNING AVE REEDLEY CA 93654 | | |
| Availability: OPEN | | | |
| Board Certified: | Phone: (866) 707-6664 | | |
| Language(s): HINDI | Fax: (661) 746-9197 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: OMNI FAMILY HEALTH | | | |
| WARDONO, IRA PAULA | 1100 BEAR MOUNTAIN BLVD ARVIN CA 93203 | | |
| Availability: | | | |
| Board Certified: AM BD PEDIATRICS | Phone: (661) 319-1101 | | |
| Language(s): INDONESIAN | Fax: (661) 459-3535 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: VANGUARD MEDICAL CORPORATION | | | |
| YUZON, MA CORAZON E | 1500 6TH AVE DELANO CA 93215 | | |
| Availability: CLOSED SENIOR | | | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|---|---|-------------------------------------|------------------|
| Board Certified: YES Language(s): TAGALOG Gender Affirming Care: No Group Affiliation: NORTH KERN SOUTH TULARE HOSPITAL DISTRIC | Phone: (661) 725-1010 Fax: (661) 725-1117 | | |
| ZEGARRA-LOZA, RICARDO D | 1134 E CARTMILL AVE BLDG A TULARE CA 93274 | 1500 W TULARE DR TULARE CA 93274 | |
| Availability: OPEN Board Certified: YES Language(s): Gender Affirming Care: No Group Affiliation: ALTURA CENTERS FOR HEALTH - CHERRY ST | Phone: (559) 686-9097 Fax: (559) 556-0083 | (559) 686-9097 (559) 366-7060 | |

DHIMGT Primary Care Physician Roster

| Provider Specialty / Provider Name | Primary Address | Secondary Address | Tertiary Address |
|------------------------------------|-----------------------|-------------------|------------------|
| PULMONARY DISEASES | | | |
| CHOPRA,JATINDER | 858 N CHERRY ST STE E | | |
| Availability: CLOSED TO MED-CAL | TULARE CA 93274 | | |
| Board Certified: YES | Phone: (559) 686-4766 | | |
| Language(s): PUNJABI | Fax: (559) 686-2016 | | |
| Gender Affirming Care: No | | | |
| Group Affiliation: AVENAL | | | |
| COMMUNITY | | | |
| HEALTH CENTER | | | |