



## Medicare Advantage Plans

# PROVIDER DIRECTORY

# DIRECTORIO DE PROVEEDORES

## June 2024 Updates

## Actualizaciones de junio 2024

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The Provider Directory was updated on 06/03/2024. This document lists providers and locations which were removed or added from/to Provider directory. For more recent provider directory updates, please refer to our online provider directory tool on our website [www.GlobalHealth.com](http://www.GlobalHealth.com).

### Customer Care Contact:

1-844-280-5555 (TTY: 711)  
8:00 AM - 8:00 PM, 7 days a week (October 1-March 31), and  
8:00 AM - 8:00 PM, Monday-Friday (April 1-September 30)  
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Este Directorio de Proveedores se actualizó el 06/03/2024. Este documento enumera los proveedores y las ubicaciones que se eliminaron o agregaron al directorio de proveedores. Para obtener actualizaciones más recientes del directorio de proveedores, consulte nuestra herramienta de directorio de proveedores en línea en nuestro sitio web [www.GlobalHealth.com](http://www.GlobalHealth.com).

1-844-280-5555 (TTY: 711)  
8:00 AM - 8:00 PM, los 7 días de la semana (del 1 de octubre al 31 de marzo),y  
8:00 AM - 8:00 PM, de lunes a viernes (del 1 de abril al 30 de septiembre)  
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# Providers added to GlobalHealth Network

Provider Detail	Location Name and Address	County	Phone	Provider Type	Language(s)
<b>P00009839 - C</b> MOSEL, LUKE ISAAH <b>Degree:</b> DO <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1007 N Main St Ste 101 Elk City, OK, 73644	BECKHAM	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P43550 - D</b> BLICK, BRIAN <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1007 N Main St Ste 101 Elk City, OK, 73644	BECKHAM	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012129 - A</b> PLUMB, IMRAN <b>Degree:</b> MD <b>Gender:</b> MALE	<b>MARSHALL COUNTY HMA LLC</b> 1610 W UNIVERSITY BLVD Durant, OK, 74701	BRYAN	<b>Phone:</b> 5809243400 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> INTERNAL MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00010275 - B</b> DENTON, SHERYL LYNN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>SOUTHERN PLAINS MEDICAL CENTER</b> 1104 E Central Blvd Anadarko, OK, 73005	CADDO	<b>Phone:</b> 4502476685 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012245 - A</b> GRAHAM, JAMES I <b>Degree:</b> DO <b>Gender:</b> MALE	<b>RURAL WELLNESS STROUD INC</b> 1002 E Central Blvd Anadarko, OK, 73005	CADDO	<b>Phone:</b> 4052472551 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00002649 - A</b> VITAL SYSTEMS OF OKLAHOMA INC <b>Degree:</b> <b>Gender:</b>	<b>VITAL SYSTEMS OF OKLAHOMA, INC</b> 1218 E HIGHLINE LANE Mustang, OK, 73064	CANADIAN	<b>Phone:</b> 4053769980 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> OTHER CARE PROVIDERS <b>Provider Specialty:</b> HOME INFUSION <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00003949 - B</b> SOFOLA, BOLAJI S <b>Degree:</b> MD <b>Gender:</b> MALE	<b>UROLOGY CENTER OF SOUTHERN OK, PC</b> 1119 Walnut Dr Ste 2 Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802268310 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> UROLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012069 - A</b> KERKSTRA, PAMELA SUE <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 1104 Walnut Dr Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802260543 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012069 - C</b> KERKSTRA, PAMELA SUE <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 20 12th Ave NW Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802233411 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012069 - D</b> KERKSTRA, PAMELA SUE <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 1116 Walnut Dr Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802260543 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012071 - A</b> JAMELARIN, JAHANNAH H <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 1104 Walnut Dr Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802260543 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012071 - B</b> JAMELARIN, JAHANNAH H <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 20 12th Ave NW Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802233411 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012071 - C</b> JAMELARIN, JAHANNAH H <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>GOOD SHEPHERD COMMUNITY CLINIC INC</b> 1116 Walnut Dr Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802260543 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> BEHAVIORAL HEALTH PROVIDER <b>Provider Specialty:</b> BEHAVIORAL HEALTH PROVIDER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012151 - A</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 1500 E DOWNING ST STE 208 Tahlequah, OK, 74464	CHEROKEE	<b>Phone:</b> 9184562496 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012151 - B</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 1500 E DOWNING ST STE 214 Tahlequah, OK, 74464	CHEROKEE	<b>Phone:</b> 9184310202 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012151 - D</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 124 E MAIN ST Hulbert, OK, 74441	CHEROKEE	<b>Phone:</b> 9187722879 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012151 - F</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 1500 E DOWNING ST STE 103 Tahlequah, OK, 74464	CHEROKEE	<b>Phone:</b> 9187083580 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00011915 - A</b> WILLINGHAM, MATTHEW <b>Degree:</b> PT <b>Gender:</b> MALE	<b>ORTHO CENTRAL CLINIC</b> 3400 W Tecumseh Rd Ste 103 Norman, OK, 73072	CLEVELAND	<b>Phone:</b> 4055158080 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012144 - A</b> HILL, KAITLYN <b>Degree:</b> DPT <b>Gender:</b> FEMALE	<b>BENCHMARK PHYSICAL THERAPY</b> 334 12TH AVE SE STE 130 Norman, OK, 73071	CLEVELAND	<b>Phone:</b> 4053106590 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P44150 - A</b> LIVINGSTON, PATRICK G <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORMAN REGIONAL PROVIDERS - PRIMARY CARE</b> 3400 W Tecumseh Rd Ste 100 Norman, OK, 73072	CLEVELAND	<b>Phone:</b> 4055150044 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012275 - C</b> FOSTER, SAMUEL BURK <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 217 N Weaver St Gainesville, TX, 76240	COOKE	<b>Phone:</b> 9406653247 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012278 - C</b> FOSTER, ROSHNI KANDYIL <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 217 N Weaver St Gainesville, TX, 76240	COOKE	<b>Phone:</b> 9406653247 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012279 - C</b> TARTIBI, HANA MARYAM <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 217 N Weaver St Gainesville, TX, 76240	COOKE	<b>Phone:</b> 9406653247 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012280 - C</b> BADIE, BEDIOLA A <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 217 N Weaver St Gainesville, TX, 76240	COOKE	<b>Phone:</b> 9406653247 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012281 - C</b> PATEL, GAYTRI <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 217 N Weaver St Gainesville, TX, 76240	COOKE	<b>Phone:</b> 9406653247 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - E</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 303 E Taft Ave Ste 3 Sapulpa, OK, 74066	CREEK	<b>Phone:</b> 9182242222 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012085 - F</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 303 E Taft Ave Ste 3 Sapulpa, OK, 74066	CREEK	<b>Phone:</b> 9182242222 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012275 - A</b> FOSTER, SAMUEL BURK <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 2617 Scripture St Ste 101 Denton, TX, 76201	DENTON	<b>Phone:</b> 9403824142 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012275 - B</b> FOSTER, SAMUEL BURK <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 3321 Unicorn Lake Blvd Ste 121 Denton, TX, 76210	DENTON	<b>Phone:</b> 9403871700 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012278 - A</b> FOSTER, ROSHNI KANDYIL <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 2617 Scripture St Ste 101 Denton, TX, 76201	DENTON	<b>Phone:</b> 9403824142 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012278 - B</b> FOSTER, ROSHNI KANDYIL <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 3321 Unicorn Lake Blvd Ste 121 Denton, TX, 76210	DENTON	<b>Phone:</b> 9403871700 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012279 - A</b> TARTIBI, HANA MARYAM <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 2617 Scripture St Ste 101 Denton, TX, 76201	DENTON	<b>Phone:</b> 9403824142 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012279 - B</b> TARTIBI, HANA MARYAM <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 3321 Unicorn Lake Blvd Ste 121 Denton, TX, 76210	DENTON	<b>Phone:</b> 9403871700 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012280 - A</b> BADIE, BEDIOLA A <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 2617 Scripture St Ste 101 Denton, TX, 76201	DENTON	<b>Phone:</b> 9403824142 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012280 - B</b> BADIE, BEDIOLA A <b>Degree:</b> MD <b>Gender:</b> MALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 3321 Unicorn Lake Blvd Ste 121 Denton, TX, 76210	DENTON	<b>Phone:</b> 9403871700 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012281 - A</b> PATEL, GAYTRI <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 2617 Scripture St Ste 101 Denton, TX, 76201	DENTON	<b>Phone:</b> 9403824142 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012281 - B</b> PATEL, GAYTRI <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>NORTH TEXAS ALLERGY &amp; ASTHMA CENTER</b> 3321 Unicorn Lake Blvd Ste 121 Denton, TX, 76210	DENTON	<b>Phone:</b> 9403871700 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012154 - A</b> RUTLEDGE, MICHAEL R <b>Degree:</b> MD <b>Gender:</b> MALE	<b>INTEGRIS CARDIOVASCULAR PHYSICIANS LLC</b> 707 S Monroe Enid, OK, 73701	GARFIELD	<b>Phone:</b> 5806166324 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> CARDIOLOGY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00010275 - D</b> DENTON, SHERYL LYNN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>SOUTHERN PLAINS MEDICAL CENTER</b> 200 Melville Dr Pauls Valley, OK, 73075	GARVIN	<b>Phone:</b> 4053315128 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00010275 - C</b> DENTON, SHERYL LYNN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>SOUTHERN PLAINS MEDICAL CENTER</b> 2222 W Iowa Ave Chickasha, OK, 73018	GRADY	<b>Phone:</b> 4502248111 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>



<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012074 - A</b> BOLAND, SHELLY D <b>Degree:</b> LMSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1505 E Main St Stigler, OK, 74462	HASKELL	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012083 - A</b> KIRKLAND, MAECY <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1505 E Main St Stigler, OK, 74462	HASKELL	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00001497 - B</b> BARRETT, TAMI DAWN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN'S HEALTH CLINIC</b> 100 McDougal Dr Holdenville, OK, 74848	HUGHES	<b>Phone:</b> 4053794202 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00001497 - C</b> BARRETT, TAMI DAWN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN'S HEALTH CLINIC</b> 1401 W 1st WEWOKA, OK, 74884	HUGHES	<b>Phone:</b> 4052583396 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012250 - B</b> RAUH, SHELLEY LARAE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>INTEGRIS MEDICAL GROUP</b> 500 N Main St Hennessey, OK, 73742	KINGFISHER	<b>Phone:</b> 4058536100 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012081 - A</b> HUNNICUTT, TIFFANY <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 802 HWY 2 North Wilburton, OK, 74578	LATIMER	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00003470 - A</b> GROTHE, CLARK IRVIN <b>Degree:</b> LCSW <b>Gender:</b> MALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1505 E Main St Poteau, OK, 74953	LE FLORE	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012078 - A</b> FREEMAN, AIMEE NICOLE <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1120 Tarby Rd Poteau, OK, 74953	LE FLORE	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00001036 - B</b> MUNDRA, VISHAL <b>Degree:</b> MD <b>Gender:</b> MALE	<b>ONE CURA FAMILY CLINIC - STROUD INC</b> 2308B W Highway 66 Stroud, OK, 74079	LINCOLN	<b>Phone:</b> 9189681642 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> INTERNAL MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011914 - B</b> BARTHOLOMEW, JOANNA <b>Degree:</b> DO <b>Gender:</b> FEMALE	<b>INTEGRIS HEALTH MEDICAL GROUP COFFEE CREEK</b> 2916 N KELLY AVE EDMOND, OK, 73003	LOGAN	<b>Phone:</b> 4057155300 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - D</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 211 S Mill St Pryor, OK, 74361	MAYES	<b>Phone:</b> 9188253777 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - F</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 23 W Commercial St INOLA, OK, 74036	MAYES	<b>Phone:</b> 9185438880 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012085 - E</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 211 S Mill St Pryor, OK, 74361	MAYES	<b>Phone:</b> 9188253777 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012085 - G</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 23 W Commercial St INALA, OK, 74036	MAYES	<b>Phone:</b> 9185438880 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012151 - E</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 5319 S MILL ST Pryor, OK, 74361	MAYES	<b>Phone:</b> 9189815000 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012075 - A</b> MITCHELL, COURTNEY RACHAY <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 212 W Spaulding Ave Checotah, OK, 74426	MCINTOSH	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012076 - A</b> LYONS, JAMIE ANN <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 212 W Spaulding Ave Checotah, OK, 74426	MCINTOSH	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012080 - A</b> WALL, REYNADA LENEIGH <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 111 Forest Ave Ste A Eufaula, OK, 74432	MCINTOSH	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012151 - C</b> O DONNELL, BRENDAN <b>Degree:</b> DO <b>Gender:</b> MALE	<b>NORTHEASTERN OKLAHOMA COMMUNITY HEALTH CENTERS INC</b> 922 N YORK ST Muskogee, OK, 74401	MUSKOGEE	<b>Phone:</b> 9187722879 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OBSTETRICS & GYNECOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00010030 - D</b> TORGHABEH, MEHYAR HEFAZI <b>Degree:</b> MD <b>Gender:</b> MALE	<b>CREEK NATION HOSPITAL AND CLINICS</b> 1800 E Coplin Ave Okemah, OK, 74859	OKFUSKEE	<b>Phone:</b> 9186231424 <b>Panel Status:</b> <b>Restriction:</b> Native American Patient Only	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> RADIOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00002366 - B</b> CELII, AMANDA MICHELLE <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>INTEGRIS MEDICAL GROUP</b> 3366 NW Expressway Ste 800 Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4057139935 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> GENERAL SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00004501 - C</b> KLAHR, LAVON L <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00004652 - B</b> TARASOVA, ALISA <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00007169 - C</b> DOWNS, KRISTEN A <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00008018 - B</b> NABORS, TERESA <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00008283 - B</b> SWAIM, AMELIA B <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00011795 - A</b> PITLER, JULIE <b>Degree:</b> DPT <b>Gender:</b> FEMALE	<b>PHYSICAL THERAPY CENTRAL</b> 10908 - C N May Ave Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4052974500 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011844 - B</b> ROLFE, MARK W <b>Degree:</b> MD <b>Gender:</b> MALE	<b>INTEGRIS CARDIOVASCULAR PHYSICIANS LLC</b> 3400 NW EWY STE 300 Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4057139900 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PULMONARY DISEASE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011855 - A</b> WILSON, TERRI G <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011980 - B</b> DEES, RICHARD L <b>Degree:</b> DO <b>Gender:</b> MALE	<b>INTEGRIS MEDICAL GROUP</b> 4833 INTEGRIS PKWY STE 150 Edmond, OK, 73034	OKLAHOMA	<b>Phone:</b> 4056573990 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012008 - A</b> LANE, LINDSAY ELIZABETH <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012130 - A</b> TRAN, TONY <b>Degree:</b> OT <b>Gender:</b> MALE	<b>INTEGRIS AMBULATORY CARE CORP</b> 11101 HEFNER POINTE DR STE 207 Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4057209812 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OCCUPATIONAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012203 - A</b> RUEDA, CARLOS ALBERTO <b>Degree:</b> MD <b>Gender:</b> MALE	<b>CARDIOVASCULAR HEALTH CLINIC PLLC</b> 3200 Quail Springs Parkway Suite 200 Oklahoma City, OK, 73134	OKLAHOMA	<b>Phone:</b> 4057019880 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> VASCULAR SURGERY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00012211 - A</b> WARDWORTH, JESSICA A <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012212 - A</b> JOHNSON, KELLY MARLENE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012213 - A</b> HOWARD, LATONIA QUEEN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>PHYSICIAN HOUSECALLS, LLC</b> 101 W Hefner Rd Oklahoma City, OK, 73114	OKLAHOMA	<b>Phone:</b> 4058968058 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF16007 - B</b> AVEANNA HEALTHCARE MEDICAL SOLUTIONS <b>Degree:</b> <b>Gender:</b>	<b>AVEANNA HEALTHCARE MEDICAL SOLUTIONS - OK</b> 720 NE 63rd St Oklahoma City, OK, 73105	OKLAHOMA	<b>Phone:</b> 4058487337 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> DURABLE MEDICAL EQUIPMENT SUPPLIER <b>Provider Specialty:</b> DURABLE MEDICAL EQUIPMENT & SUPPLIES <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00010030 - E</b> TORGHABEH, MEHYAR HEFAZI <b>Degree:</b> MD <b>Gender:</b> MALE	<b>CREEK NATION HOSPITAL AND CLINICS</b> 1401 Morris Dr Okmulgee, OK, 74447	OKMULGEE	<b>Phone:</b> 9187564233 <b>Panel Status:</b> <b>Restriction:</b> Native American Patient Only	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> RADIOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012262 - A</b> PODLESKI, GREGG T <b>Degree:</b> DO <b>Gender:</b> MALE	<b>MCALESTER MEDICAL SERVICES LLC</b> 1 E Clark Bass Blvd Ste 210 McAlester, OK, 74501	PITTSBURG	<b>Phone:</b> 9184216754 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00011793 - B</b> HAMRE, CANDICE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>CROSSROADS MEDICAL MANAGEMENT PC</b> 2508 N Harrison St Shawnee, OK, 74804	POTTAWATOMI E	<b>Phone:</b> 4055852030 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00012141 - A</b> RACHAL, LAURA <b>Degree:</b> DPT <b>Gender:</b> FEMALE	<b>ATHLETICO PHYSICAL THERAPY</b> 2506 N HARRISON ST Shawnee, OK, 74804	POTTAWATOMI E	<b>Phone:</b> 4052140300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012125 - A</b> CARBONE, NOELLE <b>Degree:</b> DPT <b>Gender:</b> FEMALE	<b>ADVANCED ORTHOPEDICS OF OKLAHOMA PLLC</b> 1071 W BLUE STARR DR STE 105 Claremore, OK, 74017	ROGERS	<b>Phone:</b> 9182832992 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012072 - A</b> LEA, JOHANNA <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1630 S Kerr Blvd Sallisaw, OK, 74955	SEQUOYAH	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00012073 - A</b> LOEWEN, ASHLEY LYNN <b>Degree:</b> LCSW <b>Gender:</b> FEMALE	<b>STIGLER HEALTH &amp; WELLNESS CENTER INC</b> 1630 S Kerr Blvd Sallisaw, OK, 74955	SEQUOYAH	<b>Phone:</b> 8006409741 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> LICENSED CLINICAL SOCIAL WORKER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>P00001083 - B</b> TEDESCO, JOHN VICTOR <b>Degree:</b> DO <b>Gender:</b> MALE	<b>GREEN COUNTRY SURGICAL ARTS</b> 11911 S Oxford Ave Ste 200 Tulsa, OK, 74137	TULSA	<b>Phone:</b> 9186000026 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PLASTIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00001315 - B</b> GURSKY, RYAN ERIC <b>Degree:</b> DO <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 10507 E 91st St Ste 450 Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9183073170 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00001315 - D</b> GURSKY, RYAN ERIC <b>Degree:</b> DO <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 4802 S 109th E Ave Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9183921400 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00004279 - B</b> ONIGBINDE, EZEKIEL <b>Degree:</b> MD <b>Gender:</b> MALE	<b>MORTON COMPREHENSIVE HEALTH SERVICES</b> 1334 N Lansing Ave Tulsa, OK, 74106	TULSA	<b>Phone:</b> 9185872171 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00006875 - A</b> GABRIEL, JEAN-LOUIS <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 10507 E 91st St Ste 450 Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9183073170 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00006875 - C</b> GABRIEL, JEAN-LOUIS <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 4800 S 109th E Ave Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9183921482 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00010030 - B</b> TORGHABEH, MEHYAR HEFAZI <b>Degree:</b> MD <b>Gender:</b> MALE	<b>CREEK NATION HOSPITAL AND CLINICS</b> 10109 E 79th St Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9189407543 <b>Panel Status:</b> <b>Restriction:</b> Native American Patient Only	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> RADIOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - G</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 220 W 71st St S Ste 2 Tulsa, OK, 74132	TULSA	<b>Phone:</b> 9185848522 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011352 - B</b> STROMBERG, JEFFREY <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 10507 E 91st St Ste 450 Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9183073170 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011352 - D</b> STROMBERG, JEFFREY <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 4800 S 109th E Ave Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9183921482 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>



<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P00011713 - B</b> NELSON, CHASE K <b>Degree:</b> DO <b>Gender:</b> MALE	<b>UTICA PARK CLINIC</b> 2405 W Main St Ste B Tulsa, OK, 74104	TULSA	<b>Phone:</b> 9186501190 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OTOLARYNGOLOGY (ENT) <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012017 - A</b> MONTALBANO, MICHELLE MARIE <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>CAREY CLINIC</b> 7125 S Braden Ave Tulsa, OK, 74136	TULSA	<b>Phone:</b> 9184818100 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ALLERGY & IMMUNOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012085 - B</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 220 W 71st St S Ste 2 Tulsa, OK, 74132	TULSA	<b>Phone:</b> 9185848522 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012128 - A</b> HULLBERG, EMILY <b>Degree:</b> DPT <b>Gender:</b> FEMALE	<b>TULSA BONE AND JOINT ASSOCIATES PC</b> 4802 S 109TH E AVE Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9183921400 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012136 - B</b> FRANCOIS, ELVIS <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES PC</b> 6600 S YALE AVE Tulsa, OK, 74136	TULSA	<b>Phone:</b> 9183073170 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012156 - A</b> SMITH, CASEY L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 4812 S 109th E Avenue Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9183921400 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012156 - B</b> SMITH, CASEY L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>TULSA BONE AND JOINT ASSOCIATES</b> 6475 S Yale Avenue Ste 200 Tulsa, OK, 74136	TULSA	<b>Phone:</b> 9184944460 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> ORTHOPEDIC SURGERY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF19926 - C</b> AVEANNA HEALTHCARE MEDICAL SOLUTIONS <b>Degree:</b> <b>Gender:</b>	<b>AVEANNA HEALTHCARE MEDICAL SOLUTIONS - OK</b> 12101 E 51st St Ste 106 Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9182522000 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> DURABLE MEDICAL EQUIPMENT SUPPLIER <b>Provider Specialty:</b> DURABLE MEDICAL EQUIPMENT & SUPPLIES <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - C</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 11911 S Memorial Dr BIXBY, OK, 74008	WAGONER	<b>Phone:</b> 9189433790 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012085 - D</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 11911 S Memorial Dr BIXBY, OK, 74008	WAGONER	<b>Phone:</b> 9189433790 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00011134 - A</b> ALLEN, ELIZABETH GRACE <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 1407 SE Washington Blvd Bartlesville, OK, 74006	WASHINGTON	<b>Phone:</b> 9183352273 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00012085 - H</b> ROZELL, RALYNDA DAWN <b>Degree:</b> APRN-CNP <b>Gender:</b> FEMALE	<b>AXIS HEALTHCARE</b> 1407 SE Washington Blvd Bartlesville, OK, 74006	WASHINGTON	<b>Phone:</b> 9183352273 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

# Provider locations added to GlobalHealth Network

Provider Detail	Location Name and Address	County	Phone	Provider Type	Language(s)
<b>P46634 - F</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 5602 SW Lee Blvd Lawton, OK, 73505	COMANCHE	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>P46634 - I</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 5370 NW Cache Rd Ste 4 Lawton, OK, 73505	COMANCHE	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>P46227 - Y</b> COTTON, KAITLYN <b>Degree:</b> PT <b>Gender:</b> FEMALE	<b>PHYSICAL THERAPY CENTRAL</b> 1725 South Highway 183 STE 100 Clinton, OK, 73601	CUSTER	<b>Phone:</b> 5803231682 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P20269 - D</b> NEUMANN, DAVID A <b>Degree:</b> MD <b>Gender:</b> MALE	<b>INTEGRIS BASS BAPTIST HEALTH CENTER</b> 600 S Monroe Enid, OK, 73701	GARFIELD	<b>Phone:</b> 5809771960 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> GASTROENTEROLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P204294 - F</b> PHILLIPS, TERRELL R <b>Degree:</b> DO <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 14041 N Eastern Edmond, OK, 73013	OKLAHOMA	<b>Phone:</b> 4056014227 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P46634 - D</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1007 N Main St Ste 101 Edmond, OK, 73034	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>P46634 - E</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1616 S Kelly Ave Edmond, OK, 73013	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P46634 - G</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 8100 S Walker Bldg C Oklahoma City, OK, 73139	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>P00004291 - F</b> SCOTT, MICHAEL J <b>Degree:</b> DO <b>Gender:</b> MALE	<b>UTICA PARK CLINIC CLAREMORE</b> 1501 N Florence Ave Ste 201 Claremore, OK, 74017	ROGERS	<b>Phone:</b> 9183411886 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PULMONARY DISEASE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P5295 - J</b> MCGUIRE, BRET A <b>Degree:</b> PT <b>Gender:</b> MALE	<b>ADVANCED ORTHOPEDICS OF OKLAHOMA</b> 1071 W Blue Starr Dr Ste 105 Claremore, OK, 74017	ROGERS	<b>Phone:</b> 9182832992 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P5295 - M</b> MCGUIRE, BRET A <b>Degree:</b> PT <b>Gender:</b> MALE	<b>SUMMIT PHYSICAL THERAPY</b> 1071 W Blue Starr Dr Claremore, OK, 74017	ROGERS	<b>Phone:</b> 9183423800 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P33612 - D</b> PRIDDLE, JOSHUA T <b>Degree:</b> DO <b>Gender:</b> MALE	<b>CENTRAL OKLAHOMA FAMILY MEDICAL CENTER</b> 2403 W Wrangler Blvd Seminole, OK, 74868	SEMINOLE	<b>Phone:</b> 5804365111 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> SPORTS MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P33612 - D</b> PRIDDLE, JOSHUA T <b>Degree:</b> DO <b>Gender:</b> MALE	<b>CENTRAL OKLAHOMA FAMILY MEDICAL CENTER</b> 2403 W Wrangler Blvd Seminole, OK, 74868	SEMINOLE	<b>Phone:</b> 5804365111 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P38977 - B</b> BULL, LISA J <b>Degree:</b> MD <b>Gender:</b> FEMALE	<b>PATHOLOGY LABORATORY ASSOCIATES, INC</b> 4142 S Mingo Road Tulsa, OK, 74146	TULSA	<b>Phone:</b> 9184176400 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> DERMATOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P4356 - B</b> CHICOINE, GERALD <b>Degree:</b> DC <b>Gender:</b> MALE	<b>CHICOINE GERALD</b> 1605 S EUCALYPTUS SUITE 100 BROKEN ARROW, OK, 74012	TULSA	<b>Phone:</b> 9188362225 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> CHIROPRACTOR <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P5295 - K</b> MCGUIRE, BRET A <b>Degree:</b> PT <b>Gender:</b> MALE	<b>ADVANCED ORTHOPEDICS OF OKLAHOMA</b> 2488 E 81st St Ste 290 Tulsa, OK, 74137	TULSA	<b>Phone:</b> 9189273199 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P46634 - H</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 900 17th St Woodward, OK, 73801	WOODWARD	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH,POR TUGUESE,SPANISH</b>

# Provider Details updated in GlobalHealth Network

Provider Detail	Location Name and Address	County	Phone	Provider Type	Language(s)
<b>PF46778 - A</b> TEXOMA REGIONAL EYE INSTITUTE LLC <b>Degree:</b> <b>Gender:</b>	<b>TEXOMA REGIONAL EYE INSTITUTE LLC</b> 5389 N 1st Ave Durant, OK, 74701	BRYAN	<b>Phone:</b> 5809245211 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> OPHTHALMOLOGIC SURGERY CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF42021 - C</b> SOONER HEALTH SERVICES III INC <b>Degree:</b> <b>Gender:</b>	<b>SOONER HEALTH SERVICES III INC</b> 4400 GRANT BLVD STE 107 Yukon, OK, 73099	CANADIAN	<b>Phone:</b> 4053792300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF11567 - A</b> ARDMORE REGIONAL SURGERY CENTER LLC <b>Degree:</b> <b>Gender:</b>	<b>ARDMORE REGIONAL SURGERY CENTER</b> 2002 12th Ave NW, Ste C Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802240007 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF5537 - A</b> SOUTHERN OKLAHOMA SURGICAL CENTER INC <b>Degree:</b> <b>Gender:</b>	<b>SOUTHERN OKLAHOMA SURGICAL CENTER INC</b> 2412 N Commerce St Ardmore, OK, 73401	CARTER	<b>Phone:</b> 5802265000 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF15307 - A</b> WEST NORMAN ENDOSCOPY CENTER <b>Degree:</b> <b>Gender:</b>	<b>WEST NORMAN ENDOSCOPY</b> 3101 W Tecumseh Rd, Ste 100 Norman, OK, 73072	CLEVELAND	<b>Phone:</b> 4055155900 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF42174 - A</b> ORTHO CENTRAL SURGERY CENTER <b>Degree:</b> <b>Gender:</b>	<b>ORTHO CENTRAL SURGERY CENTER</b> 3400 W Tecumseh Rd, Ste 301 Norman, OK, 73072	CLEVELAND	<b>Phone:</b> 4053014200 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF44221 - A</b> MEDICAL PLAZA ENDOSCOPY <b>Degree:</b> <b>Gender:</b>	<b>MEDICAL PLAZA ENDOSCOPY CENTER</b> 1125 N Porter Ave, Ste 304 Norman, OK, 73071	CLEVELAND	<b>Phone:</b> 4055152799 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P46634 - F</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 5602 SW Lee Blvd Lawton, OK, 73505	COMANCHE	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH,POR TUGUESE,SPANISH</b>
<b>PF43862 - A</b> ELARA CARING XXIV <b>Degree:</b> <b>Gender:</b>	<b>ELARA CARING LAWTON</b> 7205 W Gore Blvd Suite B Lawton, OK, 73505	COMANCHE	<b>Phone:</b> 5805108006 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF44966 - C</b> COMPLETE HOME HEALTH OF TISHOMINGO LLC <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OF TISHOMINGO LLC LAWTON BRANCH</b> 5108 W Gore Blvd Ste 2B Lawton, OK, 73505	COMANCHE	<b>Phone:</b> 5803719300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00002371 - A</b> TRIAD SURGERY CENTER GROVE <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER GROVE</b> 63223 E 290 RD Grove, OK, 74344	DELAWARE	<b>Phone:</b> 9187863937 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF45689 - D</b> TRIAD SURGERY CENTER LLC (BARTLESVILLE) <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER GROVE</b> 63223 E 290 Rd Grove, OK, 74344	DELAWARE	<b>Phone:</b> 9187863937 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF46742 - A</b> INTEGRIS HOME CARE NORTHEAST <b>Degree:</b> <b>Gender:</b>	<b>INTEGRIS HOME CARE NORTHEAST</b> 2229 S Main St Grove, OK, 74344	DELAWARE	<b>Phone:</b> 9185402577 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF10408 - A</b> INTEGRIS BASS HOME HEALTH <b>Degree:</b> <b>Gender:</b>	<b>INTEGRIS BASS HOME HEALTH</b> 401 S 3rd Enid, OK, 73701	GARFIELD	<b>Phone:</b> 5805481116 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF43930 - A</b> COMPLETE HOME HEALTH ENID AND TULSA <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OF WESTERN OKLAHOMA ENID</b> 1109 Cherry Ave Enid, OK, 73703	GARFIELD	<b>Phone:</b> 5802274663 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00001364 - A</b> SURGERY CENTER OF ENID INC <b>Degree:</b> <b>Gender:</b>	<b>SURGERY CENTER OF ENID</b> 1133 W WILLOW ROAD ENID, OK, 73703	GRANT	<b>Phone:</b> 5802337171 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF43489 - A</b> COMPLETE HOME HEALTH OF STIGLER <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH STIGLER</b> 806 E Main St Stigler, OK, 74462	HASKELL	<b>Phone:</b> 9189678542 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>



<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF44966 - B</b> COMPLETE HOME HEALTH OF TISHOMINGO LLC <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OF TISHOMINGO LLC</b> 315 N Western Ave Tishomingo, OK, 73460	JOHNSTON	<b>Phone:</b> 5803719300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF42815 - A</b> HEALTHCARE INNOVATION IN-HOME SERVICES OF PURCELL <b>Degree:</b> <b>Gender:</b>	<b>HEALTHCARE INNOVATION IN HOME SERVICES OF PURCELL</b> 208 W MAIN ST PURCELL, OK, 73080	MCCLAIN	<b>Phone:</b> 4055270480 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF44966 - A</b> COMPLETE HOME HEALTH OF TISHOMINGO LLC <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OF TISHOMINGO LLC BROKEN BOW BRANCH</b> 3979 S Park Dr Broken Bow, OK, 74728	MCCURTAIN	<b>Phone:</b> 5803719300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF14695 - A</b> TRIAD SURGERY CENTER MUSKOGEE <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER LLC</b> 3131 MILITARY BLVD MUSKOGEE, OK, 74401	MUSKOGEE	<b>Phone:</b> 9186876600 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF45689 - A</b> TRIAD SURGERY CENTER LLC (BARTLESVILLE) <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER MUSKOGEE</b> 3131 Military Blvd Muskogee, OK, 74401	MUSKOGEE	<b>Phone:</b> 9186876600 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P46634 - D</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1007 N Main St Ste 101 Edmond, OK, 73034	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH,POR TUGUESE,SPANISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P46634 - E</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1616 S Kelly Ave Edmond, OK, 73013	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>P46634 - G</b> SHARRAH, DAVID L <b>Degree:</b> MD <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 8100 S Walker Bldg C Oklahoma City, OK, 73139	OKLAHOMA	<b>Phone:</b> 5803398001 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,POR TUGUESE,SPA NISH
<b>PF11750 - A</b> ESEC, LLC <b>Degree:</b> <b>Gender:</b>	<b>ESEC SURGERY CENTER LLC</b> 3705 NW 63rd St Ste 100 Oklahoma City, OK, 73116	OKLAHOMA	<b>Phone:</b> 4054633484 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF14035 - A</b> HOME INTEGRATION INC <b>Degree:</b> <b>Gender:</b>	<b>ULTIMATE ONE HOME HEALTHCARE</b> 3617 NW 58th St, Ste 102 Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4056062200 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF204350 - A</b> INTERIM HEALTHCARE OF OKLAHOMA CITY <b>Degree:</b> <b>Gender:</b>	<b>INTERIM HEALTHCARE OKLAHOMA CITY</b> 3613 NW 56th St, Ste 385 Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4058483555 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF205987 - B</b> MERCY HOME HEALTH <b>Degree:</b> <b>Gender:</b>	<b>MERCY HOME HEALTH OKLAHOMA CITY</b> 4401 W Memorial Rd Ste 143 Oklahoma City, OK, 73134	OKLAHOMA	<b>Phone:</b> 4054868600 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH
<b>PF23469 - A</b> CATARACT INSTITUTE OF OKLAHOMA <b>Degree:</b> <b>Gender:</b>	<b>CATARACT INSTITUTE OF OKLAHOMA</b> 3840 S BOULEVARD EDMOND, OK, 73013	OKLAHOMA	<b>Phone:</b> 4054553937 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> ENGLISH

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF24668 - A</b> INTEGRIS DDSI ENDOSCOPY CENTERS LLC <b>Degree:</b> <b>Gender:</b>	<b>DIGESTIVE DISEASE SPECIALISTS SOUTH</b> 4201 S Western Ave Oklahoma City, OK, 73109	OKLAHOMA	<b>Phone:</b> 4056324000 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF27832 - B</b> HEALTHCARE INNOVATIONS IN-HOME SERVICES OF OKLAHOMA CITY, LLC [27832] <b>Degree:</b> <b>Gender:</b>	<b>HEALTHCARE INNOVATIONS IN HOME SERVICES OF OKLAHOMA CITY LLC</b> 3030 NW Expressway Ste 1204-A Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4059499984 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF3559 - A</b> MCGEE EYE SURGERY CENTER LLC <b>Degree:</b> <b>Gender:</b>	<b>MCGEE EYE SURGERY CENTER</b> 1000 N LINCOLN BLVD, #150 Oklahoma City, OK, 73104	OKLAHOMA	<b>Phone:</b> 4052713363 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF36032 - A</b> ADVANCED SURGICAL & RESEARCH SOLUTIONS LLC <b>Degree:</b> <b>Gender:</b>	<b>ADVANCED SURGICAL RESEARCH SOLUTIONS LLC</b> 3200 Quail Springs Pkwy, Ste 100 Oklahoma City, OK, 73134	OKLAHOMA	<b>Phone:</b> 4052413795 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF42661 - A</b> PARAMOUNT HOME HEALTH LLC <b>Degree:</b> <b>Gender:</b>	<b>PARAMOUNT HOME HEALTH</b> 2630 NW Expressway, Ste B Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4052954300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF42883 - A</b> SELECT HOME HEALTH <b>Degree:</b> <b>Gender:</b>	<b>SELECT HOME HEALTH</b> 11212 N May Ave, Ste 406 Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4052861354 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF46262 - B</b> OKLAHOMA SPINE SURGERY CENTER <b>Degree:</b> <b>Gender:</b>	<b>OKLAHOMA SPINE SURGERY CENTER</b> 13313 Meridian Ave Bldg B Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4058496979 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF49 - A</b> INTEGRIS DDSI ENDOSCOPY CENTERS LLC <b>Degree:</b> <b>Gender:</b>	<b>OKLAHOMA ENDOSCOPY NORTH</b> 3366 NW EXPRESSWAY, BLDG D STE 400 Oklahoma City, OK, 73112	OKLAHOMA	<b>Phone:</b> 4057021300 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF9123 - A</b> COMPLETE HOME HEALTH-OKLAHOMA CITY <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OKLAHOMA CITY</b> 1232 SW 89th Oklahoma City, OK, 73139	OKLAHOMA	<b>Phone:</b> 4058793470 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF46741 - A</b> INTEGRIS HOME CARE NORTHEAST <b>Degree:</b> <b>Gender:</b>	<b>INTEGRIS HOME CARE NORTHEAST</b> 119 S Main Miami, OK, 74354	OTTAWA	<b>Phone:</b> 9185402577 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF43930 - B</b> COMPLETE HOME HEALTH ENID AND TULSA <b>Degree:</b> <b>Gender:</b>	<b>COMPLETE HOME HEALTH OF WESTERN OKLAHOMA STILLWATER</b> 8550 N Washington Stillwater, OK, 74075	PAYNE	<b>Phone:</b> 5802274663 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00001058 - B</b> TRIAD SURGERY CENTER MCALESTER <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER MCALESTER</b> 1001 E WYANDOTTE AVE McAlester, OK, 74501	PITTSBURG	<b>Phone:</b> 9183029232 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF43864 - A</b> ELARA CARING XXV <b>Degree:</b> <b>Gender:</b>	<b>ELARA CARING MCALESTER</b> 403 W Carl Albert Pkwy Mcalester, OK, 74501	PITTSBURG	<b>Phone:</b> 9184237667 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF45689 - C</b> TRIAD SURGERY CENTER LLC (BARTLESVILLE) <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER MCALESTER</b> 1001 E Wyandotte Ave McAlester, OK, 74501	PITTSBURG	<b>Phone:</b> 9183029232 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF13243 - A</b> ASPIRE HOME CARE & HOSPICE <b>Degree:</b> <b>Gender:</b>	<b>ELARA CARING ADA</b> 2020 Arlington Rd SUITE 5 Ada, OK, 74820	PONTOTOC	<b>Phone:</b> 8555277473 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF18589 - A</b> APEX SURGERY CENTER LLC <b>Degree:</b> <b>Gender:</b>	<b>APEX SURGERY CENTER LLC</b> 2001 Craddock Rd Ada, OK, 74820	PONTOTOC	<b>Phone:</b> 5802790066 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00001058 - A</b> TRIAD SURGERY CENTER MCALESTER <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER LLC</b> 6140 S MEMORIAL Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9182522020 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>P00001059 - A</b> TRIAD SURGERY CENTER TULSA <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER LLC</b> 6140 S MEMORIAL DR Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9182522020 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P13292 - A</b> BIDDLE, KASH K <b>Degree:</b> DO <b>Gender:</b> MALE	<b>AUXILIUM HEALTH NETWORK LLC</b> 3300 S Aspen Ave STE C Broken Arrow, OK, 74012	TULSA	<b>Phone:</b> 9184552416 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF12888 - A</b> TULSA ENDOSCOPY CENTER <b>Degree:</b> <b>Gender:</b>	<b>TULSA ENDOSCOPY CENTER</b> 4200 E Skelly Dr Ste 100 Tulsa, OK, 74135	TULSA	<b>Phone:</b> 9187286023 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF34338 - A</b> SOUTH TULSA SURGERY CENTER <b>Degree:</b> <b>Gender:</b>	<b>SOUTH TULSA SURGERY CENTER</b> 9840 E 81St St, Ste 200 Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9188728447 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF4069 - A</b> EYE SURGERY CENTER <b>Degree:</b> <b>Gender:</b>	<b>EYE SURGERY CENTER OF TULSA</b> 7191 S Yale Ave Tulsa, OK, 74136	TULSA	<b>Phone:</b> 9185241600 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF43864 - B</b> ELARA CARING XXV <b>Degree:</b> <b>Gender:</b>	<b>ELARA CARING XXV</b> 4815 S Harvard Ste 300 Tulsa, OK, 74135	TULSA	<b>Phone:</b> 9189602888 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF45689 - B</b> TRIAD SURGERY CENTER LLC (BARTLESVILLE) <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER TULSA</b> 6140 S Memorial Tulsa, OK, 74133	TULSA	<b>Phone:</b> 9189947818 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>


<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>PF9518 - A</b> INTERIM HEALTHCARE OF TULSA INC <b>Degree:</b> <b>Gender:</b>	<b>INTERIM HEALTHCARE TULSA</b> 2828 E 51st St, Ste 102 Tulsa, OK, 74105	TULSA	<b>Phone:</b> 9187499933 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> HOME HEALTH <b>Provider Specialty:</b> HOME HEALTH <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>
<b>PF45689 - E</b> TRIAD SURGERY CENTER LLC (BARTLESVILLE) <b>Degree:</b> <b>Gender:</b>	<b>TRIAD SURGERY CENTER LLC</b> 3615 SE KENTUCKY ST BARTLESVILLE, OK, 74006	WASHINGTON	<b>Phone:</b> 9183332020 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SURGICAL CENTER <b>Provider Specialty:</b> AMBULATORY SURGICAL CENTER <b>Accepts Medicaid:</b> No	<b>Language(s):</b> <b>ENGLISH</b>

# Provider Location Details Updated in GlobalHealth Network

Provider Detail	Location Name and Address	County	Phone	Provider Type	Language(s)
<b>P7827 - A</b> FINCH, COREY <b>Degree:</b> MD <b>Gender:</b> MALE	<b>MOORE CARE CLINIC</b> 507 NE 12th St Moore, OK, 73160	CLEVELAND	<b>Phone:</b> 4052379955 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P00007363 - A</b> HOWARD, BRONWYN <b>Degree:</b> APRN <b>Gender:</b> FEMALE	<b>UTICA PARK CLINIC</b> 309 W MAIN ST Stroud, OK, 74079	LINCOLN	<b>Phone:</b> 9189870067 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> PRIMARY CARE NURSE PRACTITIONER <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P1827 - A</b> HAIVALA, DARIN R <b>Degree:</b> MD <b>Gender:</b> MALE	<b>EYE ASSOCIATES OF OKLAHOMA PLLC</b> 12318 ST ANDREWS DR Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4057520717 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OPHTHALMOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P19510 - A</b> LEONARD, ROBERT E <b>Degree:</b> MD <b>Gender:</b> MALE	<b>EYE ASSOCIATES OF OKLAHOMA PLLC</b> 12318 St Andrews Dr Oklahoma City, OK, 73120	OKLAHOMA	<b>Phone:</b> 4057520717 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> OPHTHALMOLOGY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH,SPANISH
<b>P204294 - B</b> PHILLIPS, TERRELL R <b>Degree:</b> DO <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 1616 S Kelly Ave Edmond, OK, 73013	OKLAHOMA	<b>Phone:</b> 4053300015 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH
<b>P204294 - C</b> PHILLIPS, TERRELL R <b>Degree:</b> DO <b>Gender:</b> MALE	<b>WESTERN OKLAHOMA PAIN SPECIALISTS</b> 301 SW 80th St Oklahoma City, OK, 73139	OKLAHOMA	<b>Phone:</b> 4056014227 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PAIN MANAGEMENT <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> ENGLISH



<b>Provider Detail</b>	<b>Location Name and Address</b>	<b>County</b>	<b>Phone</b>	<b>Provider Type</b>	<b>Language(s)</b>
<b>P13292 - A</b> BIDDLE, KASH K <b>Degree:</b> DO <b>Gender:</b> MALE	<b>AUXILIUM HEALTH NETWORK LLC</b> 3300 S Aspen Ave STE C Broken Arrow, OK, 74012	TULSA	<b>Phone:</b> 9184552416 <b>Panel Status:</b> Accepts new patients <b>Restriction:</b>	<b>Provider Type:</b> PRIMARY CARE PHYSICIAN <b>Provider Specialty:</b> FAMILY MEDICINE <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>
<b>P5295 - I</b> MCGUIRE, BRET A <b>Degree:</b> PT <b>Gender:</b> MALE	<b>SUMMIT PHYSICAL THERAPY</b> 9045 N 121st E Ave Ste 700 Owasso, OK, 74055	TULSA	<b>Phone:</b> 9183765077 <b>Panel Status:</b> <b>Restriction:</b>	<b>Provider Type:</b> SPECIALIST <b>Provider Specialty:</b> PHYSICAL THERAPY <b>Accepts Medicaid:</b> Yes	<b>Language(s):</b> <b>ENGLISH</b>



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