



Blue Shield TotalDual Plan (HMO D-SNP)

2024 年服務提供者目錄

縣：San Diego

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Blue Shield of California is an independent licensee of the Blue Shield Association

Blue Shield TotalDual Plan | 2024 年提供者名錄

簡介

此提供者名錄包含 Blue Shield TotalDual Plan 提供者類型的相關資訊，以及截至名錄日期的所有計劃提供者清單。清單包含地址、聯絡資訊及其他詳細資訊，例如營業日期和時間、專科和技能。關鍵術語及其定義按字母順序在《承保範圍說明書》最後一章中列示。

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†同時註冊了Medi-Cal的DSNP提供者

如有問題，請致電 Blue Shield TotalDual Plan，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。如欲瞭解更多資訊，請造訪 www.blueshieldca.com/medicare



A. 免責聲明

- ❖ 本名錄列出了醫療保健專業人員（如醫生、執業護士和心理學家）和機構（如醫院或診所）。本名錄也列出您作為 Blue Shield TotalDual Plan 會員可使用的長期服務與支援 (LTSS) 提供者（例如成人日間護理和家庭健康提供者）。我們亦列出了您可用於獲取處方藥的藥房。
- ❖ 於本名錄中，這些群體被稱為「網絡內提供者」。該等提供者與我們簽訂了合約以向您提供服務。這是 Blue Shield TotalDual Plan 面向 San Diego 縣提供服務的網絡內提供者清單。
- ❖ 您可免費索取本文件的其他格式，例如：大字版、盲文版或音訊版。請致電 1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。
- ❖ 我們提供免費口譯服務，回答您有關我們的健康或藥物計劃的任何問題。如須請求口譯員協助，只需致電 1-800-452-4413。會說英語、西班牙語、阿拉伯語、波斯語、亞美尼亞語、高棉語、韓語、俄語、他加祿語或越南語的人員可以為您提供幫助。這是一項免費服務。您可提出標準申請，以於現在或未來獲得英語之外的其他語言或其他格式的文件。如欲提出申請，請聯絡 Blue Shield TotalDual Plan 客戶關懷部，其將記錄您的偏好語言和格式，以供未來進行溝通。如欲更新偏好，請聯絡 Blue Shield TotalDual Plan。
- ❖ 此清單為截至 05/03/2024 日的最新版本，但您需知悉：
 - 此名錄出版後，Blue Shield TotalDual Plan 的某些網絡內提供者可能已納入或移出我們的網絡。
 - Blue Shield TotalDual Plan 的某些網絡內提供者可能不再接受新會員。如果您在尋找接受新會員的提供者時遇到困難，請致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，我們將為您提供幫助。
 - 如欲獲取有關所在區域 Blue Shield TotalDual Plan 網絡內提供者的最新資訊，請造訪 www.blueshieldca.com/medicare，或致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。

Blue Shield TotalDual Plan 網絡中的醫生和其他醫療保健專業人員列於第 13-2452 頁。

您可使用目錄背面的索引來查找列明服務提供者或藥房的頁面。

B. Blue Shield TotalDual Plan 網絡內服務提供者背景資訊

B1. 關鍵術語

本節就目錄中的關鍵術語作出說明。

- **服務提供者**指專業人員，例如醫生、護士、藥劑師、治療師及其他提供護理及服務的人士。**服務**包括醫療護理、長期服務與支援 (LTSS)、用品、處方藥、設備及其他服務。
 - 術語提供者包括醫院、診所以及其他提供醫療服務和醫療設備的場所。其中也包括 Blue Shield TotalDual Plan 會員可使用的 LTSS 提供者。
 - 屬於我們計劃網絡一部分的提供者被稱為網絡提供者。
- **網絡內提供者**已與我們簽約，以向本計劃的會員提供服務。網絡內提供者參與我們的計劃。這意味著他們接受本計劃的會員，並且提供本計劃承保的服務。當您在網絡內提供者處看診時，您通常無須為承保服務付費。
- **主治醫師 (PCP)** 指為您提供常規醫療保健的內科醫生、家庭醫生、全科醫生或專科醫生。PCP 將保存您的醫療紀錄，而長此以往其將瞭解您的健康需求。倘若您需要看專科醫生或其他提供者，您的 PCP 亦將為您安排轉介。
- **專科醫生**指為單種疾病或身體某部位提供醫療保健服務的醫生。專科醫生分為多種類別。此為幾個示例：
 - 腫瘤科醫生，負責治療癌症患者。
 - 心臟科醫生，負責治療心臟有問題的患者。
 - 骨科醫生，負責治療骨頭、關節或肌肉有某些問題的患者。
- **醫療團體或獨立醫師協會 (IPA, Independent Physician Association)** 是根據加州法律成立的組織，該組織與健康計劃簽約，以為健康計劃參保人提供或安排提供醫療保健服務。請查閱第 B3 節，以瞭解其他資訊。
- 您可能需要一個轉介或者事先的授權去看專家或非您的 PCP 的人。轉介指您的網絡 PCP 必須先獲得您的批准，然後您才能使用其他服務提供者。**事先授權**與轉介不同。其指的是 Blue Shield TotalDual Plan (非您的網絡內 PCP) 必須先予以批准，然後我們才會承保特定服務、用品、藥物或網絡外服務提供者。如果您未獲得轉介或者事先授權，Blue Shield TotalDual Plan 可能不會承保該服務、用品或藥物。
 - 下述各項無需轉介或事先授權：
 - 急診護理；
 - 急需護理；
 - 當您不在計劃的服務區域時，您在 Medicare 認證的透析機構獲得的腎透析服務；
 - 婦女健康專家的服務；或

†同時註冊了Medi-Cal的DSNP提供者

如有問題，請致電 Blue Shield TotalDual Plan，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。如欲瞭解更多資訊，請造訪 www.blueshieldca.com/medicare



– Medicare 承保的所有預防性服務，包括篩檢和疫苗。

- 此外，如果您符合資格獲得印第安健康提供者提供的服務，您可在此等提供者處就診，無需轉介。我們須為該等服務向印第安健康提供者付款，即便其不在我們計劃的網絡內。
- 更多關於轉介和事先授權的資訊可查閱《承保範圍說明書》第 3 章。
- 您也將被指派一個**護理團隊**。護理團隊從您與 PCP 的關係開始，為您提供服務。根據您護理計劃中所述的需求等級，護理團隊可能包括照護者、護理指導員、專科醫生和其他人員。護理團隊中的每位成員將通力合作，確保您的護理得到妥善協調。這表示他們確保您接受所需的所有測試、化驗及其他護理，並與相關提供者共享結果。這也表示您的 PCP 應知道您使用的所有藥物，以便幫助您減少任何副作用。在與其他提供者分享您的醫療資訊之前，PCP 始終會先徵求您的同意。護理團隊成員可能包括：
 - **護理指導員**，可幫助您管理您的醫療提供者及服務。
 - **您的主治醫師**

如果您需要專科醫生或其他醫療保健提供者，護理團隊也將幫助您尋找提供醫療、行為健康或長期服務與支援 (LTSS) 的其他提供者。那樣您將獲得適合的提供者，以幫助解決您的問題。

B2. 初級保健和行為健康的等待時間

我們必須在以下時間範圍內為您提供初級保健和行為健康服務：

- 立即提供緊急服務或緊急情況；
- 7 天內，適用於非緊急或緊急需要、但您需要醫療護理的服務；
- 30 天內，適用於常規或預防性護理。

B3. 如何選擇主治醫師 (PCP)

首先，您需要選擇一位主治醫生 (PCP)。您也可讓專科醫生擔任您的 PCP。如果專科醫生同意提供一般由 PCP 提供的所有服務，則您可以選擇專科醫生擔任您的 PCP。如需讓您的專科醫生擔任您的 PCP，請聯絡 Blue Shield TotalDual Plan 客戶關懷部。您可選擇接受新會員的任何網絡內 PCP。

我們計劃的 PCP 隸屬於醫療團體。當您選擇 PCP 時，您也選擇了其所屬的醫療團體。這意味著，您的 PCP 會將您轉介至同樣隸屬於其醫療團體的專科醫生和服務提供者。

- 如果您想使用特定的專科醫生或醫院，請務必瞭解他們是否屬於您的 PCP 所在的醫療團體。請在本目錄中查找或詢問 Blue Shield TotalDual Plan 客戶關懷部，以便確定您想選擇的 PCP 是否可將您轉介至該專科醫生處或使用該醫院。
- 如果您離開 PCP 所在的醫療團體，Blue Shield TotalDual Plan 可能不會承保該服務。

若要選擇 PCP，請參閱第 13-2452 頁上的醫生列表並選擇一位醫生：

- 您目前使用的醫生，或
- 您信任的人士推薦的醫生，或

- 您方便前往其診室的醫生。
- 如果您未在網絡內選擇一個 PCP，Blue Shield TotalDual Plan 將會為您做出選擇。
- 如果您想幫助更換 PCP，請致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天上午 8 點至晚上 8 點。此為免費電話。或者造訪 www.blueshieldca.com/medicare
- 如果您對我們是否承保您想要或需要的任何服務或護理有任何疑問，與您的護理團隊探討或致電客戶關懷部，電話：1-800-452-4413 (TTY: 711) 並在接受該服務或護理之前來電諮詢。

B4. 長期服務與支援 (LTSS) 服務提供者

作為 Blue Shield TotalDual Plan 的會員，如有需求，您將能獲得長期服務與支援 (LTSS)，例如社區成人日間服務 (CBAS)，該服務在社區中心提供護理服務、身體、職業和言語治療、治療活動和膳食。此外，居家援助服務 (IHSS) 指為沒有護理援助就無法安全居家的人士提供的居家護理。LTSS 旨在幫助在沐浴、穿衣、烹飪和用藥等日常活動中需要協助的人士。其中大部分服務是在您的家中或社區中提供，但也可以在療養院或醫院提供。

如果您需要 LTSS，您的護理指導員或 MSSP 可幫助您與您的護理團隊確定哪些選項可以您想要的方式提供支援。

B5. 如何從 Blue Shield TotalDual Plan 網絡內提供者處獲取服務

您必須從屬於您 PCP 所在醫療團體的網絡內提供者處獲取所有承保服務。如果您就診的服務提供者不屬於 Blue Shield TotalDual Plan 網絡，並且不屬於您 PCP 所在醫療團體（沒有取得事先授權），則需您自己支付賬單。

事先授權是指 Blue Shield TotalDual Plan 事先批准接受網絡外服務或者我們的網絡通常不承保的服務，然後您才能接受該等服務。

本規定之唯一例外情況包括：當您需要緊急或急診護理或透析服務，但無法獲得計劃內提供者服務的情況，例如身處外地的時候。如果 Blue Shield TotalDual Plan 事先已授予許可，您也可前往不屬於計劃或您 PCP 醫療團隊的提供者處獲取非急診服務。

- 您可於全年任何時候在網絡內更換提供者。如您已在使用一位網絡內提供者，您無需繼續同位提供者。對於某些提供者，您可能需要 PCP 的轉介。如果我們在當月 20 號之前收到您的申請，PCP 更換將於次月首日開始生效。若要更換您的 PCP，請致電客戶關懷部。在您致電時，請務必告知客戶關懷部您是否就在診專科醫生，或是否在接受其他需要 PCP 批准的承保服務（例如：居家健康服務和耐用醫療設備）。當您更換 PCP 時，客戶關懷部將會協助確保您可繼續獲得專科醫生的護理或其他服務。客戶關懷部還會確定您想要指定的 PCP 是否接受新患者。客戶關懷部會將新 PCP 的姓名更新到您的會員記錄中，並告知您新 PCP 更換的生效日期。客戶關懷部還將給您郵寄一張新會員卡，註明新 PCP 的姓名與電話號碼。
- 請記住，我們計劃的 PCP 隸屬於醫療團體。如果您更換 PCP，可能也變更了醫療團體。在您申請更換時，請務必告知客戶關懷部您是否在向專科醫生求診，或是否在接受其他需要 PCP 批准的承保服務。當您更換 PCP 時，客戶關懷部將會協助確保您可繼續獲得專科醫生的護理或其他服務。

†同時註冊了 Medi-Cal 的 DSNP 提供者

如有問題，請致電 Blue Shield TotalDual Plan，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。如欲瞭解更多資訊，請造訪 www.blueshieldca.com/medicare



- Blue Shield TotalDual Plan 會與網絡內所有提供者合作，幫助滿足殘障人士的各種需求。本目錄所載網絡內提供者清單包含其所提供的便利設施的資訊（如適用）。
- 若您需要前去某個提供者處就診，但不確定他們能否提供您所需的便利設施，Blue Shield TotalDual Plan 可以幫助您。請諮詢您的護理指導員，以獲取協助。

C. Blue Shield TotalDual Plan 網絡內提供者清單

目錄的這一部分包括了 Blue Shield TotalDual Plan 的網絡內提供者，這些網絡內提供者同時參與並接受 Blue Shield TotalDual Plan。其中包含：

- **醫療保健專業人員**，包括主治醫生、專科醫生、行為健康服務提供者、牙科服務提供者、視力服務提供者；
- **機構**，包括醫院、護理機構、行為健康機構；及
- **支援提供者**，包括長期服務與支援 (LTSS) (例如成人日間健康) 和社區支援服務 (例如同儕支援)。

Medi-Cal 牙科管理式護理提供者列在牙科管理護理計劃的網站上。目前，牙科管理式護理計劃名稱為：Liberty Dental Plan、Access Dental Plan 和 Health Net of California。可以根據服務提供者名稱、地址、城市、郵遞區號、專業或所使用的語言進行搜尋。有關當前計劃的資訊，您還可以撥打 1-800-430-4263 (TTY 用戶請撥打 1-800-430-7077) 聯絡 Health Care Options 尋求幫助，週一至週五上午 8 點至下午 6 點。

Medi-Cal 牙科收費服務提供者列於 Smile, California 網站的《提供者目錄》中：

www.dental.dhcs.ca.gov/find-a-dentist/home。可以根據地址、城市、郵遞區號、專業或所使用的語言進行搜尋。除了《提供者目錄》可以搜尋已登記的牙科服務提供者外，Smile, California 同時提供一份按縣列出的已登記註冊牙科衛生師名單。

San Mateo 的牙科服務由 Health Plan of San Mateo (HPSM) 承保。這份《提供者目錄》已列入計劃的網站。可以根據服務提供者名稱或郵遞區號進行搜尋。

提供者將按其姓氏的字母順序排列。在目錄末尾的索引處，您還可找到提供者名稱及其他聯絡資訊的所在頁面。在索引中，提供者按其姓氏的字母順序排列。除聯絡資訊外，提供者清單還包含專科與技能資訊，例如所說的語言或文化能力培訓的完成情況。

文化能力培訓是針對醫療保健提供者的額外指導，能幫助他們更深入地瞭解您的文化背景、價值觀和信仰，以便調整服務，適應您的社會、文化和語言需求。

Blue Shield TotalDual Plan 整體網絡組成如下：

PCP 總數: 2754

專科醫生總數: 2858

醫院總數: 20

針灸和脊椎按摩師總數：服務提供者: No Data

牙科服務提供者總數: No Data

居家健康服務提供者總數: 1

精神健康服務提供者總數: 351

視力服務提供者總數: 445

長期服務與支援提供者總數: No Data

精神健康機構總數: No Data

專業護理機構總數: 84

其他服務提供者: 1

C1. 網絡內提供者清單 附屬醫院

ALVARADO HOSPITAL LLC

Effective as of 01-AUG-12

6655 ALVARADO RD
SAN DIEGO, CA 92120

ENCOMPASS HEALTH REHABILITATION HOSPITAL OF MURRIETA

Effective as of 01-AUG-20

35470 WHITEWOOD RD
MURRIETA, CA 92563

HEMET GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

1117 E DEVONSHIRE AVE
HEMET, CA 92543

Birthing Friendly: Y

HOAG HOSPITAL IRVINE

Effective as of 01-FEB-14

16200 SAND CANYON AVE
IRVINE, CA 92618

HOAG ORTHOPEDIC INSTITUTE

Effective as of 01-JAN-12

16250 SAND CANYON AVE
IRVINE, CA 92618

KINDRED HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

MENIFEE GLOBAL MEDICAL CENTER

Effective as of 01-JAN-20

28400 MCCALL BLVD
SUN CITY, CA 92585

MISSION HOSPITAL LAGUNA BEACH

Effective as of 01-JAN-10

31872 COAST HWY
LAGUNA BEACH, CA 92651

PALOMAR HEALTH

Effective as of 01-JAN-12

15615 POMERADO RD
POWAY, CA 92064

Birthing Friendly: Y

PALOMAR MEDICAL CENTER

Effective as of 01-JAN-12

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

PARADISE VALLEY HOSPITAL

Effective as of 01-AUG-12

2400 E 4TH ST
NATIONAL CITY, CA 91950

PROVIDENCE MISSION HOSPITAL

Effective as of 01-JAN-10

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Birthing Friendly: Y

SADDLEBACK MEMORIAL MED CTR

Effective as of 01-JAN-12

24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

Birthing Friendly: Y

SCRIPPS GREEN HOSPITAL

Effective as of 01-JAN-12

10666 N TORREY PINES RD

MS 220

LA JOLLA, CA 92037

SCRIPPS MEMORIAL HOSPITAL

Effective as of 01-JAN-12

9888 GENESEE AVE
LA JOLLA, CA 92037

Birthing Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Effective as of 01-JAN-12

354 SANTA FE DR
ENCINITAS, CA 92024

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL

Effective as of 01-JAN-12

4077 5TH AVE
SAN DIEGO, CA 92103

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL CHULA VISTA

Effective as of 01-JAN-12

435 H ST
CHULA VISTA, CA 91910

SELECT SPECIALTY HOSPITAL SAN DIEGO

Effective as of 01-JAN-12

555 WASHINGTON ST
SAN DIEGO, CA 92103

TRI CITY MEDICAL CTR

Effective as of 01-JAN-12

4002 VISTA WAY
OCEANSIDE, CA 92056

Birthing Friendly: Y

C1. 網絡內提供者清單 附屬醫院

UCSD LA JOLLA JOHN SALLY THORNTON

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103




Birthing Friendly: Y

C1. 網絡內提供者清單




緊急護理中心

本計劃承保網絡內與網絡為的急需服務。如欲網絡內緊急照護中心的最新清單，請聯絡您的醫療團體。




ACCELERATED URGENT CARE

 28110 CLINTON KEITH RD
MURRIETA, CA 92563
 (951) 436-0777
 SU-SA 8:00AM-9:00PM




ACCELERATED URGENT CARE

 29400 RANCHO CALIFORNIA RD
TEMECULA, CA 92591
 (951) 595-8282
 SU-SA 8:00AM-9:00PM

ACCELERATED URGENT CARE

 41540 WINCHESTER RD
TEMECULA, CA 92590
 (951) 365-5585
 SU-SA 8:00AM-9:00PM




ACCELERATED URGENT CARE

 36290 HIDDEN SPRINGS RD
WILDOMAR, CA 92595
 (951) 483-2020
 SU-SA 8:00AM-9:00PM

ANAHEIM URGENT CARE INC



 22855 LAKE FOREST DR
LAKE FOREST, CA 92630
 (949) 676-9991

BAHIA FAMILY MEDICAL GROUP INC




 584 E ST
CHULA VISTA, CA 91910
 (619) 420-1378
 M-F 8:00AM-5:30PM

CONCENTRA URGENT CARE




 5810 EL CAMINO REAL STE

A
CARLSBAD, CA 92008
 (866) 944-6046
 M-F 7:00AM-6:00PM




CONCENTRA URGENT CARE

 542 BROADWAY STE G
CHULA VISTA, CA 91910
 (866) 944-6046
 M-F 8:00AM-6:00PM




CONCENTRA URGENT CARE

 860 W VALLEY PKWY STE 150
ESCONDIDO, CA 92025
 (760) 740-0707
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 15751 ROCKFIELD BLVD
IRVINE, CA 92618
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 7862 EL CAJON BLVD
LA MESA, CA 91942
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 22741 LAMBERT ST STE 1608
LAKE FOREST, CA 92630
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 25115 MADISON AVE
MURRIETA, CA 92562
 (866) 944-6046
 M-F 8:00AM-7:00PM

CONCENTRA URGENT CARE

 102 MILE OF CARS WAY
NATIONAL CITY, CA 91950
 (866) 944-6046
 M-F 7:00AM-7:00PM




CONCENTRA URGENT CARE

 3910 VISTA WAY STE 106
OCEANSIDE, CA 92056
 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 5575 RUFFIN RD STE 100
SAN DIEGO, CA 92123
 (866) 944-6046

CONCENTRA URGENT CARE

 10350 BARNES CANYON RD STE 200
SAN DIEGO, CA 92121
 (858) 455-0044
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 7590 MIRAMAR RD STE C
SAN DIEGO, CA 92126
 (866) 944-6046
 M-F 8:00AM-5:00PM

CONCENTRA URGENT CARE

 5333 MISSION CENTER RD STE 100
SAN DIEGO, CA 92108
 (866) 944-6046

CONCENTRA URGENT CARE



 5333 MISSION CENTER RD
SAN DIEGO, CA 92108
 (866) 944-6046
 M-F 8:00AM-6:00PM

CONCENTRA URGENT CARE

 3930 4TH AVE STE 200
SAN DIEGO, CA 92103

C1. 網絡內提供者清單




緊急護理中心

 (866) 944-6046
 M-F 8:00AM-5:00PM




CONCENTRA URGENT CARE

 740 NORDAHL RD STE 130
SAN MARCOS, CA 92069
 (760) 432-9000




CONCENTRA URGENT CARE

 740 NORDAHL RD STE 131
SAN MARCOS, CA 92069
 (866) 944-6046
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




CONCENTRA URGENT CARE

 9745 PROSPECT AVE STE
100
SANTEE, CA 92071
 (866) 944-6046
 M-F 7:00AM-5:00PM



DOCTORS EXPRESS OF OCEANSIDE INC


 4171 OCEANSIDE BLVD STE
109
OCEANSIDE, CA 92056
 (760) 216-6253
 SU-SA 8:00AM-8:00PM

EAST COUNTY URGENT CARE




 1625 E MAIN ST STE 100
EL CAJON, CA 92021
 (619) 442-9896
 SU 9:00AM-4:00PM
M-F 8:00AM-7:00PM
SA 9:00AM-4:00PM

HOAG CLINIC




 26671 ALISO CREEK RD STE
101
ALISO VIEJO, CA 92656
 (949) 791-3107

 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

 26672 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610
 (949) 557-0710
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

 8607 IRVINE CENTER DR
IRVINE, CA 92618
 (949) 557-0600
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

HOAG CLINIC

 16205 SAND CANYON AVE
STE 100D
IRVINE, CA 92618
 (949) 557-0000
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

HOAG CLINIC




 21115 NEWPORT COAST DR
NEWPORT BEACH, CA
92657
 (949) 557-0730
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

INLAND URGENT CARE A MED CORP




 27168 NEWPORT RD STE 1
MENIFEE, CA 92584
 (951) 246-3033

 SU-SA 9:00AM-9:00PM




INLAND URGENT CARE A MED CORP

 29738 RANCHO
CALIFORNIA RD STE B
TEMECULA, CA 92591
 (951) 303-6440
 SU-SA 9:00AM-6:00PM




INLAND URGENT CARE OF SUN CITY

 27168 NEWPORT RD STE 1
MENIFEE, CA 92584
 (951) 246-3033
 SU-SA 9:00AM-9:00PM




MARQUE URGENT CARE

 25482 MARGUERITE PKWY
STE 101
MISSION VIEJO, CA 92692
 (949) 760-9222
 SU 8:00AM-8:00PM
M-F 8:00AM-9:00PM
SA 8:00AM-8:00PM

MARQUE URGENT CARE

 22461 ANTONIO PKWY
RANCHO SANTA
MARGARITA, CA 92688
 (949) 760-9222
 SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM



MARQUE URGENT CARE

 4490 FANUEL ST
SAN DIEGO, CA 92109
 (949) 760-9222
 SU 9:00AM-5:00PM
M-F 9:00AM-8:00PM
SA 9:00AM-8:00PM




MISSION HERITAGE MED GRP

C1. 網絡內提供者清單

緊急護理中心

 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
 (949) 643-9111



MISSION HERITAGE MED GRP

 26800 CROWN VALLEY
PKWY STE 150
MISSION VIEJO, CA 92691
 (949) 276-2111
 SU 9:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM



O C URGENT CARE MEDICAL GRP INC

 26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610
 (949) 297-3888




OPTUM

 145 THUNDER DR
VISTA, CA 92083
 (760) 941-9002

RCH NORTH COUNTY URGENT CARE




 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025
 (760) 739-1543

SAND CANYON URGENT CARE MED CTR




 15775 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
 (949) 417-0272
 SU 11:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 9:00AM-5:00PM

SOUTH COAST MEDICAL

GROUP

 5 JOURNEY STE 130
ALISO VIEJO, CA 92656
 (949) 360-1069
 SU 10:00AM-3:00PM
M-F 8:00AM-7:00PM
SA 9:00AM-3:00PM

SOUTHBAY URGENT CARE INC

 1628 PALM AVE
SAN DIEGO, CA 92154
 (619) 591-9999
 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM

C1. 網絡內提供者清單 初級保健提供者

FAMILY PRACTICE

OCONNOR, SHANNON, MD^F

Provider ID: 100027672003

📍 5 JOURNEY STE 130
ALISO VIEJO, CA 92656
☎ (949) 360-1069

Effective as of 01-JUL-12

OCONNOR, SHANNON, MD^F

Provider ID: 100027672005

📍 5 JOURNEY STE 130
ALISO VIEJO, CA 92656
☎ (949) 360-1069

Effective as of 01-JUL-12

OCONNOR, SHANNON, MD^F

Provider ID: 100027672006

📍 5 JOURNEY STE 130
ALISO VIEJO, CA 92656
☎ (949) 360-1069

Effective as of 01-OCT-07

GENERAL PRACTICE

THOMAS, SEAN, MD^{M†}

Provider ID: 100112751013

📍 15 MAREBLU STE 310
ALISO VIEJO, CA 92656
☎ (949) 831-1001
📱 French, Spanish

Effective as of 01-APR-19

INTERNAL MEDICINE

HERMAN, SAM, MD^M

Provider ID: 100414181004

📍 26671 ALISO CREEK RD STE
206
ALISO VIEJO, CA 92656
☎ (949) 791-3104

Effective as of 01-SEP-23

KAYE, SHAWN, MD^M

Provider ID: 100347353012

📍 26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

☎ (949) 791-3104

Effective as of 01-JAN-21

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: PG0094125003

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
☎ (619) 662-4100

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

AJIR, MAHYAR, DO^{M†}

Provider ID: 100067406005

📍 2801 JEFFERSON ST
CARLSBAD, CA 92008
☎ (760) 729-4952

📱 Farsi, Spanish

Effective as of 01-APR-16

KORFF, GARY, MD^{M†}

Provider ID: 100021811011

📍 2910 JEFFERSON ST STE
100
CARLSBAD, CA 92008
☎ (760) 729-7186

📱 Spanish

Effective as of 01-JAN-23

PEREZ, RONALD, MD^{M†}

Provider ID: 100323488011

📍 1207 CARLSBAD VILLAGE
DR STE A
CARLSBAD, CA 92008
☎ (760) 896-3030

📱 Spanish, Tagalog

Effective as of 01-JAN-20

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572021

📍 2855 CARLSBAD BLVD
CARLSBAD, CA 92008
☎ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

TRUECARE,

Provider ID: PG0092587007

📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
☎ (760) 736-6767

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

KREMER, ARNOLD, DO^M

Provider ID: 100023664010

📍 5814 VAN ALLEN WAY STE
215
CARLSBAD, CA 92008
☎ (760) 444-5544

📱 French

Teleservice

Effective as of 01-APR-23

INTERNAL MEDICINE

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662004

📍 5930 PRIESTLY DR
CARLSBAD, CA 92008
☎ (760) 434-6060

📱 Korean



Effective as of 01-NOV-21




CHONG, MARIBETH, MD^F




Provider ID: 100092861004



📍 5930 PRIESTLY DR
CARLSBAD, CA 92008

C1. 網絡內提供者清單 初級保健提供者




 (760) 434-6060
 Spanish, Tagalog
Effective as of 01-NOV-21




CHONG, YOO JIN, MD^{M†}
Provider ID: 100055662003
 5930 PRIESTLY DR
CARLSBAD, CA 92008
 (760) 434-6060
 Korean
Effective as of 01-NOV-21




CHONG, MARIBETH, MD^F
Provider ID: 100092861003
 5930 PRIESTLY DR
CARLSBAD, CA 92008
 (760) 434-6060
 Spanish, Tagalog
Effective as of 01-NOV-21




HALL, ANDREW, MD^{M†}
Provider ID: 100089811012
 2910 JEFFERSON ST STE
100
CARLSBAD, CA 92008
 (760) 729-7186
Effective as of 01-DEC-22




FAMILY PRACTICE




ALANIZ, MATEO, MD^{M††}
Provider ID: 100220769002
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
Effective as of 01-NOV-14




ALANIZ, MATEO, MD^{M†}
Provider ID: 100220769006
 678 3RD AVE
CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030006
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian, Spanish,
Tagalog
Effective as of 01-JAN-14




ALB, SIMONA, MD^{F†}
Provider ID: 100033656006
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Greek, Romanian, Spanish
Effective as of 01-JAN-14




ALB, OVIDIU, MD^{M†}
Provider ID: 100034030005
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian, Spanish,
Tagalog
Effective as of 01-OCT-12




ALB, SIMONA, MD^{F†}
Provider ID: 100033656005
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Greek, Romanian, Spanish
Effective as of 01-OCT-12




ALB, OVIDIU, MD^{M†}
Provider ID: 100034030017
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian, Spanish,
Tagalog
Effective as of 01-NOV-20




ALB, SIMONA, MD^{F†}
Provider ID: 100033656016



 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Greek, Romanian, Spanish
Effective as of 01-SEP-22

ALB, SIMONA, MD^{F†}
Provider ID: 100033656019
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Greek, Romanian, Spanish
Effective as of 01-SEP-22

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030019
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian, Spanish,
Tagalog
Effective as of 01-APR-22

ALB, SIMONA, MD^{F†}
Provider ID: 100033656018
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Greek, Romanian, Spanish
Effective as of 01-APR-22

ALB, OVIDIU, MD^{M†}
Provider ID: 100034030016
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian, Spanish,
Tagalog
Effective as of 01-JAN-21

ALJAWADI, GEORGIA, DO^{F†}
Provider ID: 100133625021
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361


C1. 網絡內提供者清單 初級保健提供者

 Filipino, Spanish, Tagalog
Effective as of 01-APR-22

ALJAWADI, GEORGIA, DO^{Ft}

Provider ID: 100133625008

 480 4TH AVE STE 202
CHULA VISTA, CA 91910


 (619) 427-3361

 Filipino, Spanish, Tagalog
Effective as of 01-JAN-14

ALJAWADI, GEORGIA, DO^{Ft+}

Provider ID: 100133625022

 480 4TH AVE STE 202
CHULA VISTA, CA 91910


 (619) 427-3361

 Filipino, Spanish, Tagalog
Effective as of 01-SEP-22

ALJAWADI, GEORGIA, DO^{Ft}

Provider ID: 100133625005

 480 4TH AVE STE 202
CHULA VISTA, CA 91910


 (619) 427-3361

 Filipino, Spanish, Tagalog
Effective as of 01-NOV-12

ALJAWADI, GEORGIA, DO^{Ft+}

Provider ID: 100133625018

 480 4TH AVE STE 202
CHULA VISTA, CA 91910


 (619) 427-3361

 Filipino, Spanish, Tagalog
Effective as of 01-JAN-21

ALVAREZ-ESTRADA, MIGUEL, MD^{Mt}

Provider ID: 100360099015

 1637 3RD AVE
CHULA VISTA, CA 91911

 (619) 662-4100


 Spanish

Effective as of 01-MAY-22

ARCE GOMEZ, LAURA, MD^F

Provider ID: 100300002011

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100


 Spanish, Tagalog

Effective as of 01-APR-23

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910028

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-AUG-20

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910031

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910029

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910030

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910032

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-NOV-20

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910015

 330 OXFORD ST STE 106
CHULA VISTA, CA 91911

 (619) 409-1802


 Arabic, German, Spanish

Effective as of 01-MAY-18

FARRIS, REUBEN, MD^{Mt}

Provider ID: 100105788004

 340 4TH AVE STE 2
CHULA VISTA, CA 91910

 (619) 422-8338


 Spanish

Effective as of 01-OCT-12

GARCIA, KARLA, MD^{Ft+}

Provider ID: 100269760005

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-APR-23

GARCIA, KARLA, MD^{Ft}

Provider ID: 100269760002

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100

 Spanish


Teleservice

Effective as of 01-MAR-16

HERNANDEZ, RALPH, MD^{Mt}

Provider ID: 100080408020

 880 3RD AVE STE A
CHULA VISTA, CA 91911

 (619) 662-4100

 Spanish

Effective as of 01-AUG-22

JIMENEZ, KRYSTAL, MD^{Ft+}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100359300004
📄 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
Effective as of 01-JAN-21

LOZANO, JUAN, MD^M
Provider ID: 100419136002
📄 1637 THIRD AVE
STE B
CHULA VISTA, CA 91911
☎ (619) 662-4100
Effective as of 01-DEC-23

LOZANO, JUAN, MD^M
Provider ID: 100419136007
📄 1637 THIRD AVE STE
B-F-H-I
CHULA VISTA, CA 91911
☎ (619) 662-4100
Effective as of 01-APR-24

MARTINEZ, ELADIO, MD^M
Provider ID: 100415320005
📄 299 J ST
CHULA VISTA, CA 91910
☎ (858) 554-1212
📄 Spanish
Teleservice
Effective as of 01-DEC-23

MARTINEZ, ELADIO, MD^M
Provider ID: 100415320011
📄 299 J ST
CHULA VISTA, CA 91910
☎ (858) 554-1212
📄 Spanish
Teleservice
Effective as of 01-APR-24

MARTINEZ, ELADIO, MD^M
Provider ID: 100415320002
📄 299 J ST
CHULA VISTA, CA 91910
☎ (858) 554-1212

📄 Spanish
Teleservice
Effective as of 01-OCT-23

MATTHEWS, MERRITT, MD^{M†}
Provider ID: 100021162015
📄 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
☎ (619) 656-0206
📄 Spanish, Tagalog
Effective as of 01-NOV-20

MATTHEWS, MERRITT, MD^{M†}
Provider ID: 100021162019
📄 752 MEDICAL CENTER CT
CHULA VISTA, CA 91911
☎ (619) 656-0206
📄 Spanish, Tagalog
Effective as of 01-FEB-21

MERRILL, SARAH, MD^{F†}
Provider ID: 100214679020
📄 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📄 Spanish
Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD^M
Provider ID: 100177550031
📄 855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
☎ (619) 656-5252
📄 Spanish
Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD^M
Provider ID: 100177550016
📄 855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

☎ (619) 656-5252
📄 Spanish
Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD^{M†}
Provider ID: 100177550027
📄 480 4TH AVE STE 500
CHULA VISTA, CA 91910
☎ (619) 656-5252
📄 Spanish
Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD^{M†}
Provider ID: 100177550028
📄 480 4TH AVE STE 500
CHULA VISTA, CA 91910
☎ (619) 656-5252
📄 Spanish
Effective as of 01-FEB-23

MOYA, MARY, MD^{F*}
Provider ID: 100099596009
📄 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📄 Spanish
Effective as of 01-APR-23

NGUYEN, CARIE, MD^{F†}
Provider ID: 100099766010
📄 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
Effective as of 01-APR-23

NGUYEN, CARIE, MD^{F†}
Provider ID: 100099766005
📄 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
Effective as of 01-NOV-20

NOVENCIDO, JOSEPH, DO^{M†}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100244053017

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

(619) 527-7700

Spanish

Effective as of 01-SEP-20

ORTIZ ILIZALITURRI, ANA, MD

F†

Provider ID: 100394347004

678 3RD AVE

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

PALOMINO, MARY, MD

F†

Provider ID: 100249271002

678 3RD AVE

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JUL-15

PATEL, PAAVAN, DO

M

Provider ID: 100413256011

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

(619) 656-0206

Effective as of 01-DEC-23

PATEL, PAAVAN, DO

M

Provider ID: 100413256007

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911

(619) 527-7700

Effective as of 01-NOV-23

PIEROS, JANELLE, DO

F†

Provider ID: 100220799004

678 3RD AVE

CHULA VISTA, CA 91910

(619) 662-4100

Faroese, Spanish

Effective as of 01-OCT-15

RIZKALLAH, JEAN, MD

Provider ID: 100106136010

450 4TH AVE STE 408

CHULA VISTA, CA 91910

(619) 691-1990

French, Spanish

Effective as of 01-MAR-16

RIZKALLAH, JEAN, MD

Provider ID: 100106136009

450 4TH AVE STE 408

CHULA VISTA, CA 91910

(619) 691-1990

French, Spanish

Effective as of 01-MAR-15

ROSADO, IVAN, MD

Provider ID: 100365788004

1637 3RD AVE STE H

CHULA VISTA, CA 91911

(619) 662-4100

Effective as of 01-FEB-21

ROSADO, IVAN, MD

Provider ID: 100365788003

1635 3RD AVE

CHULA VISTA, CA 91911

(619) 662-4100

Effective as of 01-JAN-21

STILLWELL, CARLA, MD

Provider ID: 100147691020

480 4TH AVE STE 202

CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-SEP-22

STILLWELL, CARLA, MD

Provider ID: 100147691006

480 4TH AVE STE 202

CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-JAN-14

STILLWELL, CARLA, MD

Provider ID: 100147691005

480 4TH AVE STE 202

CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-OCT-12

STILLWELL, CARLA, MD

Provider ID: 100147691017

480 4TH AVE STE 202

CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-JAN-21

STILLWELL, CARLA, MD

Provider ID: 100147691019

480 4TH AVE STE 202

CHULA VISTA, CA 91910

(619) 427-3361

Polish, Portuguese, Spanish

Effective as of 01-APR-22

SWARTZ, JOHN, MD

Provider ID: 100097829004

678 3RD AVE

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Effective as of 01-JAN-14

TALAVERA, GREGORY, MD

Provider ID: 100334847006

678 3RD AVE

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice


Effective as of 01-APR-23

C1. 網絡內提供者清單 初級保健提供者

TREJO, RAUL, MD^M

Provider ID: 100088864004

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100

 Spanish


Effective as of 01-JAN-14

VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD^F

Provider ID: 100391945011

 752 MEDICAL CENTER CT
STE 200

CHULA VISTA, CA 91911

 (858) 554-1212


 Spanish

Effective as of 01-DEC-22

VOURLITIS, MELISSA, DO^{F†}

Provider ID: 100090572020

 3302 BONITA RD
CHULA VISTA, CA 91910

 (858) 832-2500


Teleservice

Effective as of 01-NOV-23

WHITLEY, NICHOLAS, MD^{M†}

Provider ID: 100197848006

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100

 Spanish


Effective as of 01-JAN-21

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: PG0025044035

 251 LANDIS AVE
CHULA VISTA, CA 91910


 (619) 515-2500

Effective as of 01-JAN-21

CHULA VISTA PEDIATRICS,

Provider ID: PG0092670003

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,

Provider ID: PG0082946004

 352 L ST
CHULA VISTA, CA 91911


 (619) 515-2325

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHULA VISTA, †

Provider ID: PG0047560016

 678 3RD AVE
CHULA VISTA, CA 91910

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER,

Provider ID: PG0120846002

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910

 (619) 662-4100


Effective as of 01-APR-23

GENERAL PRACTICE

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156004

 333 H ST STE 2000
CHULA VISTA, CA 91910

 (619) 427-0665

 French, Italian, Romanian


Teleservice

Effective as of 01-JUL-15

CEPIN, MONICA, MD^{F†}

Provider ID: 100090156007

 333 H ST STE 2000
CHULA VISTA, CA 91910

 (619) 427-0665

 French, Italian, Romanian


Teleservice

Effective as of 01-JUL-15

FARRIS, REUBEN, MD^{M†}

Provider ID: 100105788005

 340 4TH AVE STE 2
CHULA VISTA, CA 91910

 (619) 422-8338


 Spanish

Effective as of 01-JAN-14

GUEFEN, URI, MD^{M†}

Provider ID: 100072802018

 299 J ST
CHULA VISTA, CA 91910

 (858) 779-2366

 Spanish


Teleservice

Effective as of 01-MAR-22

GUEFEN, URI, MD^{M†}

Provider ID: 100072802015

 299 J ST
CHULA VISTA, CA 91910

 (858) 779-2366

 Spanish


Teleservice

Effective as of 01-NOV-23

GUEFEN, URI, MD^{M†}

Provider ID: 100072802029

 299 J ST
CHULA VISTA, CA 91910

 (858) 779-2366

 Spanish

Teleservice

Effective as of 01-DEC-23

C1. 網絡內提供者清單 初級保健提供者

TOLEDO-NADER, CAROLL, MD

M†

Provider ID: 100106153012

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish

Effective as of 01-SEP-19

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD

Provider ID: 100419155002

📍 678 THIRD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Spanish

Teleservice

Effective as of 01-DEC-23

BRACE, ELION, MD

Provider ID: 100159959035

📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990
📱 Albanian, Italian, Spanish

Effective as of 01-OCT-23

BRACE, ELION, MD

Provider ID: 100159959020

📍 450 4TH AVE STE 408
CHULA VISTA, CA 91910
☎ (619) 691-1990
📱 Albanian, Italian, Spanish

Effective as of 01-AUG-20

CHEN, TSUH YIN, MD

Provider ID: 100187934012

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100
📱 Portuguese, Spanish

Effective as of 01-APR-23

DE LA ROSA, JOSE, MD

Provider ID: 100357668004

📍 880 3RD AVE STE A
CHULA VISTA, CA 91911
☎ (619) 662-4100

Teleservice

Effective as of 01-FEB-23

DE LA ROSA, RENATO, MD

Provider ID: 100110262018

📍 754 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
☎ (619) 397-5001

📱 Spanish, Tagalog

Effective as of 01-JAN-21

DE LA ROSA, RENATO, MD

Provider ID: 100110262019

📍 754 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
☎ (619) 397-5001

📱 Spanish, Tagalog

Effective as of 01-JAN-21

DE LA ROSA, RENATO, MD

Provider ID: 100110262005

📍 754 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
☎ (619) 397-5001

📱 Spanish, Tagalog

Effective as of 01-FEB-18

DE LA ROSA, RENATO, MD

Provider ID: 100110262022

📍 754 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
☎ (619) 397-5001

📱 Spanish, Tagalog

Effective as of 01-SEP-22

HAMMETT, ERIN, DO

Provider ID: 100274639012

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ (619) 662-4100

📱 Spanish

Effective as of 01-MAR-21

KAISEY, MUSHRIK, MD

Provider ID: 100024815009

📍 340 4TH AVE STE 9
CHULA VISTA, CA 91910
☎ (619) 426-9731

📱 Arabic, Spanish

Effective as of 01-JAN-14

KAISEY, MUSHRIK, MD

Provider ID: 100024815021

📍 340 4TH AVE STE 9
CHULA VISTA, CA 91910
☎ (619) 426-9731

📱 Arabic, Spanish

Effective as of 01-SEP-22

KAISEY, MUSHRIK, MD

Provider ID: 100024815019

📍 340 4TH AVE STE 9
CHULA VISTA, CA 91910
☎ (619) 426-9731

📱 Arabic, Spanish

Effective as of 01-JAN-21

KAISEY, MUSHRIK, MD

Provider ID: 100024815007

📍 340 4TH AVE STE 9
CHULA VISTA, CA 91910
☎ (619) 426-9731

📱 Arabic, Spanish

Effective as of 01-OCT-12

MAY, LOUIS, MD

Provider ID: 100325305003

📍 1061 TIERRA DEL REY STE
303 304 305
CHULA VISTA, CA 91910

☎ (619) 662-4100

C1. 網絡內提供者清單 初級保健提供者

 Spanish

Teleservice


Effective as of 01-JUN-21

OLIVER, DEANNA, MD^F

Provider ID: 100328564040

 2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

 (619) 264-1934

 Spanish


Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F

Provider ID: 100328564045

 2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

 (619) 264-1934


 Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564043

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564027

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-SEP-21

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564041

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-NOV-23

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564034

 1323 3RD AVE
CHULA VISTA, CA 91911

 (619) 409-6900


 Spanish

Effective as of 01-SEP-22

PENA, JOSE, MD^{M†}

Provider ID: 100104432025

 333 H ST STE 1065
CHULA VISTA, CA 91910

 (619) 691-1766


 Spanish

Effective as of 01-FEB-23

PENA, JOSE, MD^{M†}

Provider ID: 100104432024

 333 H ST STE 1065
CHULA VISTA, CA 91910

 (619) 691-1766


 Spanish

Effective as of 01-JUL-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432022

 333 H ST STE 1065
CHULA VISTA, CA 91910

 (619) 691-1766


 Spanish

Effective as of 01-MAY-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432023

 333 H ST STE 1065
CHULA VISTA, CA 91910

 (619) 691-1766

 Spanish

Effective as of 01-MAY-21


UWEDJOJEVWE, LETICIA, MD

^{F†}

Provider ID: 100110303015

 340 4TH AVE STE 10

CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish


Effective as of 01-JAN-18

UWEDJOJEVWE, LETICIA, MD

^{F†}

Provider ID: 100110303031

 340 4TH AVE STE 10
CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish


Effective as of 01-NOV-23

UWEDJOJEVWE, LETICIA, MD

^{F†}

Provider ID: 100110303030

 340 4TH AVE STE 10
CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish


Effective as of 01-JAN-21

UWEDJOJEVWE, LETICIA, MD

^{F†}

Provider ID: 100110303013

 340 4TH AVE STE 10
CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish

Effective as of 01-DEC-17


PEDIATRICS

GARCIA, CARLOS, MD^{M†}

Provider ID: 100067783008

 1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

 (619) 271-4059

 Spanish

Effective as of 01-JAN-14

INTERNAL MEDICINE

C1. 網絡內提供者清單 初級保健提供者

ZAKI, MICHELLE, DO^F

Provider ID: 100360975007

3955 BEDFORD CANYON RD
STE 103
CORONA, CA 92883

(951) 293-4722

Teleservice

Effective as of 01-AUG-23

FAMILY PRACTICE

GAIKWAD, SHILPA, MD^{Ft}

Provider ID: 100113091011

32585 GOLDEN LANTERN ST STE E
DANA POINT, CA 92629

(877) 696-3622

Hindi, Spanish

Effective as of 01-AUG-22

INTERNAL MEDICINE

PATHAK, RAJIV, MD^M

Provider ID: 100423996002

32585 GOLDEN LANTERN ST STE E
DANA POINT, CA 92629

(949) 240-2555

Effective as of 01-MAR-24

GENERAL PRACTICE

KREMER, ARNOLD, DO^{Mt}

Provider ID: 100023664009

1349 CAMINO DEL MAR STE B
DEL MAR, CA 92014

(858) 925-8233

French

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

ALMANSOUR, MUMTAZ, MD^{Mt}

Provider ID: 100107873025

330 S MAGNOLIA AVE STE 101
EL CAJON, CA 92020

(619) 593-3007

Arabic, Kurdish, Spanish

Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{Mt}

Provider ID: 100107873024

330 S MAGNOLIA AVE STE 101
EL CAJON, CA 92020

(619) 593-3007

Arabic, Kurdish, Spanish

Effective as of 01-JUL-22

ALMANSOUR, MUMTAZ, MD^{Mt}

Provider ID: 100107873026

165 S 1ST ST
EL CAJON, CA 92019

(619) 312-0347

Arabic, Kurdish, Spanish

Effective as of 01-JAN-21

BEYENE, YEMISRACH, MD^{Ft}

Provider ID: 100376573004

5442 SYCUAN RD
EL CAJON, CA 92019

(619) 445-0707

Effective as of 01-SEP-22

GREEN, HANNAH, MD^F

Provider ID: 100403549002

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Spanish

Effective as of 01-APR-23

JALISI, NEJAT, MD^{Ft}

Provider ID: 100114413018

1320 E MADISON AVE
EL CAJON, CA 92021

(619) 456-9800

Arabic, Farsi, Spanish

Effective as of 01-JAN-21

JALISI, NEJAT, MD^{Ft}

Provider ID: 100114413020

1320 E MADISON AVE
EL CAJON, CA 92021

(619) 456-9800

Arabic, Farsi, Spanish

Effective as of 01-SEP-22

KASAWA, JOHN, MD^{Mt}

Provider ID: 100039117021

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Arabic, Spanish

Teleservice

Effective as of 01-JAN-21

KASAWA, JOHN, MD^{Mt}

Provider ID: 100039117023

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Arabic, Spanish

Teleservice

Effective as of 01-APR-23

KUNIN-RIDA, TERI, MD^{Ft}

Provider ID: 100064070015

165 S 1ST ST
EL CAJON, CA 92019

(619) 312-0347

Arabic, Armenian, Spanish

Teleservice

Effective as of 01-OCT-21

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650010

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Spanish

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431013

 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751

Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}


Provider ID: 100112431012

 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751

Effective as of 01-AUG-20

PUTRUS, RAMIZ, MD^M

Provider ID: 100348831004

 183 S 1ST ST
EL CAJON, CA 92019
 (619) 328-1335

Effective as of 01-AUG-22

RONQUILLO, KAREN AN, DO^F

Provider ID: 100421622002

 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751

Effective as of 01-FEB-24

RONQUILLO, KAREN AN, DO^F


Provider ID: 100421622004

 855 E MADISON AVE
EL CAJON, CA 92020
 (619) 440-2751

Effective as of 01-APR-24

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719024

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac

Effective as of 01-AUG-21

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719007

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac

Effective as of 01-FEB-18

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719020

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac

Effective as of 01-JAN-21

ROUEL, LINDA, MD^{F†}




Provider ID: 100259719021

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac

Effective as of 01-JAN-21

ROUEL, LINDA, MD^{F†}



Provider ID: 100259719025

 860 JAMACHA RD STE 107
EL CAJON, CA 92019
 (619) 456-9920
 Arabic, Mandarin, Syriac

Effective as of 01-SEP-22

SALEM, RAMSEY, MD^{M†}



Provider ID: 100360207006

 875 EL CAJON BLVD
EL CAJON, CA 92020
 (858) 939-5864

Effective as of 01-AUG-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888014

 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991

Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888012



 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347

Teleservice

Effective as of 01-JUL-21

STONES, RACHEL, MD^F

Provider ID: 100387928010



 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347

Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928009

 1032 BROADWAY
EL CAJON, CA 92021
 (619) 795-5991

Teleservice

Effective as of 01-MAY-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572018

 11588 VIA RANCHO SAN
DIEGO
EL CAJON, CA 92019
 (858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

CENTRO MEDICO EL CAJON,

Provider ID: PG0010260015

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 (619) 873-8940

Effective as of 01-JAN-21

CHASE AVENUE FAMILY

C1. 網絡內提供者清單 初級保健提供者

HEALTH CTRS INC,

Provider ID: PG0025044040

1111 W CHASE AVE
EL CAJON, CA 92020
(619) 515-2499

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: PG0084245003

525 E MAIN ST
EL CAJON, CA 92020
(619) 515-2498

Effective as of 01-JAN-21

LA MAESTRA CHC EL CAJON BROADWAY, †

Provider ID: PG0085229003

1032 BROADWAY
EL CAJON, CA 92021
(619) 795-5991

Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396002

165 S 1ST ST
EL CAJON, CA 92019
(619) 312-0347

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH EL CAJON,

Provider ID: PG0111464002

875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100

Teleservice

Effective as of 01-JAN-21

GENERAL PRACTICE

MOOSAVI, MOHAMMAD, MD^{M†}

Provider ID: 100339082002

343 E MAIN ST STE 102
EL CAJON, CA 92020
(619) 447-6001

Farsi

Effective as of 01-JUL-19

INTERNAL MEDICINE

AL-TAMEEMI, AHMED, MD^{M†}

Provider ID: 100338426004

133 W MAIN ST STE 100
EL CAJON, CA 92020
(619) 401-0404

Effective as of 01-NOV-20

AWDISHO, ALAN, DO^{M†}

Provider ID: 100381973002

875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100

Teleservice

Effective as of 01-JAN-22

BENSON, JIMI, MD^{M†}

Provider ID: 100149523029

1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703

Spanish, Vietnamese

Effective as of 01-APR-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523023

1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703

Spanish, Vietnamese

Effective as of 01-JAN-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523026

1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703

Spanish, Vietnamese
Effective as of 01-JUN-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523028

1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703

Spanish, Vietnamese

Effective as of 01-MAR-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523031

1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703

Spanish, Vietnamese

Effective as of 01-OCT-23

EL GHONEIMY, AHMED, MD^{M†}

Provider ID: 100103500015

165 S 1ST ST
EL CAJON, CA 92019
(619) 312-0347

Arabic

Teleservice

Effective as of 01-AUG-22

ELIAS, RAMIZ, MD^{M†}

Provider ID: 100105850047

231 W MAIN ST FL 2
EL CAJON, CA 92020
(619) 631-7300

Spanish

Effective as of 01-SEP-22

JAHANPANA, FERESHTEH,
MD^{F†}

Provider ID: 100076454007

343 E MAIN ST STE 101
EL CAJON, CA 92020
(619) 447-6001

Arabic, Faroese, Farsi

Effective as of 01-JUL-19

C1. 網絡內提供者清單 初級保健提供者

JAHANPANA, FERESHTEH, MD^{F†}

Provider ID: 100076454017

📍 343 E MAIN ST STE 101
EL CAJON, CA 92020

☎ (619) 447-6001

🗣 Arabic, Faroese, Farsi

Effective as of 01-AUG-20

JAHANPANA, FERESHTEH, MD^{F†}

Provider ID: 100076454021

📍 343 E MAIN ST STE 101
EL CAJON, CA 92020

☎ (619) 447-6001

🗣 Arabic, Faroese, Farsi

Effective as of 01-SEP-22

MANSOUR, DAVID, DO^{M†}

Provider ID: 100390972007

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ (619) 440-2751

🗣 Arabic

Effective as of 01-NOV-22

MICHAEL, RAMI, MD^{M†}

Provider ID: 100341876009

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ (619) 662-4100

🗣 Arabic

Teleservice

Effective as of 01-DEC-22

NASSIR, BASSAM, MD^{M††}

Provider ID: 100159191015

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ (619) 662-4100

🗣 Arabic

Effective as of 01-MAY-21

NASSIR, BASSAM, MD^{M††}

Provider ID: 100159191011

📍 436 S MAGNOLIA AVE STE
101

EL CAJON, CA 92020

☎ (619) 662-4100

🗣 Arabic

Effective as of 01-MAR-16

REDDY, ARJUN, MD^{M†}

Provider ID: 100050929006

📍 5442 SYCUAN RD
EL CAJON, CA 92019

☎ (619) 445-0707

🗣 Spanish

Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050008

📍 860 JAMACHA RD STE 107
EL CAJON, CA 92019

☎ (619) 456-9920

🗣 Arabic, Spanish, Syriac

Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050009

📍 860 JAMACHA RD STE 107
EL CAJON, CA 92019

☎ (619) 456-9920

🗣 Arabic, Spanish, Syriac

Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}

Provider ID: 100246050015

📍 860 JAMACHA RD STE 107
EL CAJON, CA 92019

☎ (619) 456-9920

🗣 Arabic, Spanish, Syriac

Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}

Provider ID: 100246050016

📍 860 JAMACHA RD STE 107
EL CAJON, CA 92019

☎ (619) 456-9920

🗣 Arabic, Spanish, Syriac
Effective as of 01-SEP-22

TCHAKMAKJIAN, LEVON, MD^{M†}

Provider ID: 100353414007

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ (619) 662-4100

🗣 Armenian, Hebrew

Effective as of 01-NOV-21

ZAYED, AHMAD, MD^M

Provider ID: 100373969005

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

☎ (619) 401-0404

🗣 Arabic, Chinese, Mandarin

Effective as of 01-NOV-23

FAMILY PRACTICE

CLOTFELTER, CHRISTINE, DO^{F†}

Provider ID: 100065251012

📍 477 N EL CAMINO REAL
STE A306

ENCINITAS, CA 92024

☎ (760) 942-0118

🗣 Spanish

Effective as of 01-SEP-21

DUCK, CRAIG, MD^M

Provider ID: 100086514008

📍 477 N EL CAMINO REAL
STE A306

ENCINITAS, CA 92024

☎ (760) 942-0118

Effective as of 01-SEP-21

FARSAD, RAMIN, MD^M

Provider ID: 100028293005

📍 477 N EL CAMINO REAL
STE A100



ENCINITAS, CA 92024

☎ (760) 943-9111




C1. 網絡內提供者清單 初級保健提供者

 Farsi, Fataleka, Turkish
Effective as of 01-APR-02




KAKIMOTO, AMY, MD^{F†}

Provider ID: 100113530009
 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
 (760) 942-0118
Effective as of 01-SEP-21




MERCER, SCOTT, MD^{M*}

Provider ID: 100030142008
 320 SANTA FE DR STE 205
ENCINITAS, CA 92024
 (760) 944-8484
 Spanish
Effective as of 01-SEP-21




PAYNE, RICHARD, MD^{M†}

Provider ID: 100069305009
 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
 (760) 942-0118
 Spanish
Effective as of 01-SEP-21

SEXTON, PERRY, MD^{M††}



Provider ID: 100099693003
 351 SANTA FE DR STE 101
ENCINITAS, CA 92024
 (760) 274-1385
 Spanish
Effective as of 01-FEB-11

WILLIE, KADEN, DO^M

Provider ID: 100350661007
 1130 2ND ST
ENCINITAS, CA 92024
 (760) 736-6767
 Portuguese
Effective as of 01-SEP-23




FQHC

TRUECARE,

Provider ID: PG0092584007
 1130 2ND ST
ENCINITAS, CA 92024
 (760) 753-7842
Teleservice
Effective as of 01-JUL-22




GENERAL PRACTICE

FARSAD, RAMIN, MD^M




Provider ID: 100028293009
 477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
 (760) 943-9111
 Farsi, Fataleka, Turkish
Effective as of 01-JAN-21

INTERNAL MEDICINE

STEPHENSON, ROBERT, MD^{M††}



Provider ID: 100031646009
 320 SANTA FE DR STE 303
ENCINITAS, CA 92024
 (760) 943-6730
 Spanish
Effective as of 01-SEP-21

TAGDIRI, KEVEN, MD^{M*}

Provider ID: 100064987002
 4401 MANCHESTER AVE
STE 103
ENCINITAS, CA 92024
 (858) 756-3021
 Farsi, Spanish
Effective as of 01-MAR-03



FAMILY PRACTICE

AVILA, MICHAEL, MD^{M††}




Provider ID: 100369494002
 460 N ELM ST
ESCONDIDO, CA 92025
 (833) 867-4642

Effective as of 01-JUN-21




COX, VICTORIA, MD^{F†}

Provider ID: 100374049005
 704 E GRAND AVE
ESCONDIDO, CA 92025
 (619) 662-4100
Teleservice
Effective as of 01-AUG-22




DE ROTH, GEORGINE, MD^F

Provider ID: 100409222004
 362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
 (760) 741-1224
 French, Hungarian, Spanish
Effective as of 01-AUG-23




DE ROTH, GEORGINE, MD^F

Provider ID: 100409222002
 362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
 (760) 741-1224
 French, Hungarian, Spanish
Effective as of 01-JUL-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222006
 362 W MISSION AVE STE
105
ESCONDIDO, CA 92025
 (760) 741-1224
 French, Hungarian, Spanish
Effective as of 01-DEC-23

ESPARZA, SOPHIA, MD^F

Provider ID: 100402893002
 488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
 (760) 466-9800
 Spanish
Effective as of 01-MAR-23

C1. 網絡內提供者清單 初級保健提供者

KAUR, JATINDER, MD^F

Provider ID: 100315025010
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Hindi, Urdu
Effective as of 01-AUG-21

MCHENRY, KATHRYN, DO^{Ft}

Provider ID: 100320650005
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Spanish
Effective as of 01-APR-21

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650016
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
📄 Spanish
Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO^{Ft}

Provider ID: 100320650009
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Spanish
Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325007
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325006
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100

Effective as of 01-JAN-24

RASHCOVSKY SCHIFF, KARIN, MD^F

Provider ID: 100331220007
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 French
Effective as of 01-JAN-24

RASHCOVSKY SCHIFF, KARIN, MD^F

Provider ID: 100331220005
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 French
Effective as of 01-AUG-20

SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577016
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Farsi, Greek, Spanish
Effective as of 01-AUG-20

SCHULTZ, JAMES, MD^{Mt}

Provider ID: 100030577028
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ (760) 520-8100
📄 Farsi, Greek, Spanish
Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M

Provider ID: 100030577026
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
📄 Farsi, Greek, Spanish
Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^M

Provider ID: 100030577030
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
📄 Farsi, Greek, Spanish
Effective as of 01-JAN-24

SIVA, TENAYA, MD^M

Provider ID: 100418703004
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100
Teleservice
Effective as of 01-NOV-23

SNYDER, CHRISTOPHER, DO^{Mt}

Provider ID: 100024789048
📍 704 E GRAND AVE
ESCONDIDO, CA 92025
☎ (619) 662-4100
📄 Spanish
Teleservice
Effective as of 01-FEB-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572019
📍 710 W 13TH AVE
ESCONDIDO, CA 92025
☎ (858) 832-2500
Teleservice
Effective as of 01-NOV-23

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: PG0083717004
📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
☎ (760) 871-0606
Teleservice
Effective as of 01-JAN-21

ESCONDIDO FAMILY HEALTH CENTER,

C1. 網絡內提供者清單 初級保健提供者

Provider ID: PG0125224002

128 N BROADWAY
ESCONDIDO, CA 92025

(619) 515-2474

Effective as of 01-NOV-23

NEIGHBORHOOD

HEALTHCARE ESCONDIDO,

Provider ID: PG0024990052

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Teleservice

Effective as of 01-JUL-22

NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL,

Provider ID: PG0087195004

426 N DATE ST
ESCONDIDO, CA 92025

(760) 690-5900

Effective as of 01-JUL-22

NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL,

Provider ID: PG0024990050

425 N DATE ST
ESCONDIDO, CA 92025

(760) 520-8340

Teleservice

Effective as of 01-JUL-22

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY,

Provider ID: PG0024990046

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Teleservice

Effective as of 01-JUL-22

PALOMAR FAMILY

COUNSELING SERVICES,

Provider ID: PG0125237002

1002 E GRAND AVE
ESCONDIDO, CA 92025

(760) 741-2660

Effective as of 01-DEC-23

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE,

Provider ID: PG0094132003

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Effective as of 01-JUN-22

GENERAL PRACTICE

LOPEZ, IRMA, MD^{Ft}

Provider ID: 100082249016

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025

(760) 480-4747

Spanish

Effective as of 01-JAN-21

INTERNAL MEDICINE

CARRERA, JORGE, MD^{Mt}

Provider ID: 100075629010

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Spanish

Teleservice

Effective as of 01-FEB-22

CHEN, MARGARET, MD^{Ft}

Provider ID: 100184661008

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Greek, Spanish

Effective as of 01-AUG-20

PEDIATRICS

STRAZICICH, KARLA, MD^F

Provider ID: 100080501007

426 N DATE ST
ESCONDIDO, CA 92025

(760) 690-5900

Effective as of 01-JAN-24

FAMILY PRACTICE

CHRISTIE, PATRICIA, MD^F

Provider ID: 100407567004

1328 S MISSION RD
FALLBROOK, CA 92028

(760) 451-4720

Effective as of 01-AUG-23

DEEL, MARGARET, MD^{Ft}

Provider ID: 100027747012

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-AUG-20

DEEL, MARGARET, MD^{Ft}

Provider ID: 100027747004

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-OCT-14

DEEL, MARGARET, MD^{Ft}

Provider ID: 100027747016

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-MAR-24

DEEL, MARGARET, MD^{Ft}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100027747015
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-SEP-22

DEEL, MARGARET, MD^{Ft}
Provider ID: 100027747014
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-NOV-20

MILLER, BRANDON, DO^{Mt}
Provider ID: 100148562015
521 E ELDER ST STE 105
FALLBROOK, CA 92028
(760) 728-8344
Effective as of 01-DEC-18

MILLER, BRANDON, DO^{Mt}
Provider ID: 100148562018
521 E ELDER ST STE 103
FALLBROOK, CA 92028
(760) 728-8344
Effective as of 01-NOV-20

FQHC

**FALLBROOK FAMILY HLTH
CTR,**
Provider ID: PG0009519020
1328 S MISSION RD
FALLBROOK, CA 92028
(760) 451-4720
Teleservice
Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC,
Provider ID: PG0072409011
321 E ALVARADO ST
FALLBROOK, CA 92028
(760) 723-6200

Teleservice
Effective as of 01-MAR-23

INTERNAL MEDICINE

CVIJANOVIC, GORAN, MD^{Mt}
Provider ID: 100370457002
1328 S MISSION RD
FALLBROOK, CA 92028
(760) 451-4720
Effective as of 01-JUN-21

STRUTZ, PETER, MD^{M*}
Provider ID: 100092315007
605 E ALVARADO ST STE
100
FALLBROOK, CA 92028
(760) 728-8489
Spanish
Effective as of 01-SEP-21

FAMILY PRACTICE

ARMANIOUS, NANCY, MD^{Ft}
Provider ID: 100379442002
26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610
(949) 829-9403
Effective as of 01-NOV-21

DECOCK, JAMES, MD^{Mt}
Provider ID: 100051324014
26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610
(949) 829-9403
Effective as of 01-APR-15

ESKANDARI, HAMID, MD^{Mt}
Provider ID: 100110778009
26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610

(949) 559-5153
Farsi
Effective as of 01-JUN-18

ESKANDARI, HAMID, MD^{Mt}
Provider ID: 100110778010
26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
(949) 559-5153
Farsi
Effective as of 01-JUN-18

ESKANDARI, HAMID, MD^{Mt}
Provider ID: 100110778005
26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
(949) 559-5153
Farsi
Effective as of 01-NOV-17

ESKANDARI, HAMID, MD^{Mt}
Provider ID: 100110778016
26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
(949) 559-5153
Farsi
Effective as of 01-FEB-21

ESKANDARI, HAMID, MD^{Mt}
Provider ID: 100110778017
26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610
(949) 559-5153
Farsi
Effective as of 01-OCT-22

INTERNAL MEDICINE

C1. 網絡內提供者清單 初級保健提供者

PATEL, BAKULKUMAR, MD^{M†}

Provider ID: 100034722006

26740 TOWNE CENTRE DR
BLDG C
FOOTHILL RANCH, CA
92610

(949) 588-9293

Gujarati, Hindi, Spanish
Effective as of 01-JAN-18

PEYMAN, HELYA, DO^F

Provider ID: 100414352003

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

(949) 557-0750

Effective as of 01-SEP-23

VALADEZ, JESUS, MD^{M†}

Provider ID: 100098540068

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

(949) 557-0750

Effective as of 01-JAN-21

FAMILY PRACTICE

ANDERSON, ALBERT, MD^{M†}

Provider ID: 100079441012

1000 E LATHAM AVE STE G
HEMET, CA 92543

(951) 391-0580

Spanish

Teleservice

Effective as of 01-AUG-22

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105043

2390 E FLORIDA AVE STE
104
HEMET, CA 92544

(951) 414-4011

Punjabi, Spanish, Urdu
Effective as of 01-OCT-23

ARIF, MUHAMMAD, MD^M

Provider ID: 100114105042

2390 E FLORIDA AVE STE
104

HEMET, CA 92544

(951) 414-4011

Punjabi, Spanish, Urdu
Effective as of 01-OCT-23

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934002

903 E DEVONSHIRE AVE
STE F

HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-98

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934008

903 E DEVONSHIRE AVE
STE F

HEMET, CA 92543

(951) 929-1611

Farsi, Hindi, Persian

Effective as of 01-OCT-20

CARSON, MIA, MD^F

Provider ID: 100384377002

949 CALHOUN PL STE G
HEMET, CA 92543

(951) 765-5594

Effective as of 01-MAR-22

CASSADAY, DONALD, MD^{M†}

Provider ID: 100048311004

2390 E FLORIDA AVE STE
101

HEMET, CA 92544

(951) 925-1449

Effective as of 01-NOV-17

CHAMBI-HERNANDEZ, RUTH, MD^F

Provider ID: 100113399019

1035 SAINT JOHN PL
HEMET, CA 92543

(951) 223-4833

Spanish

Effective as of 01-SEP-23

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168008

3853 W STETSON AVE STE
200

HEMET, CA 92545

(951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069005

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069011

225 LAURSEN ST
HEMET, CA 92543

(951) 925-6657

Hindi, Spanish, Telugu

Effective as of 01-APR-21

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418004

2390 E FLORIDA AVE STE
104

HEMET, CA 92544

(951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418005

2390 E FLORIDA AVE STE
104

C1. 網絡內提供者清單 初級保健提供者

HEMET, CA 92544
☎ (951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD^{F†}
Provider ID: 100047360075
📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
☎ (951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD^{F†}
Provider ID: 100047360074
📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
☎ (951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD^F
Provider ID: 100410706005
📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
☎ (951) 414-4011
📄 Spanish
Effective as of 01-AUG-23

HARRISON, AMY, MD^F
Provider ID: 100410706006
📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544
☎ (951) 414-4011
📄 Spanish
Effective as of 01-AUG-23

HEIN, PETER, MD^{M†}
Provider ID: 100169562038
📍 603 E LATHAM AVE
HEMET, CA 92543
☎ (951) 502-3500
📄 German, Russian, Spanish
Effective as of 01-NOV-22

HOWARD, NATHAN, MD^M
Provider ID: 100053015006
📍 850 E LATHAM AVE STE E
HEMET, CA 92543
☎ (951) 658-7205
Effective as of 01-JUL-23

HOWARD, NATHAN, MD^M
Provider ID: 100053015004
📍 850 E LATHAM AVE
HEMET, CA 92543
☎ (951) 658-7205
Effective as of 10-SEP-10

HUGHES, LARRY, MD^{M†}
Provider ID: 100049939002
📍 4020 W FLORIDA AVE STE H
HEMET, CA 92545
☎ (951) 925-9565
Effective as of 01-SEP-09

HUGHES, HEATHER, MD^{F*}
Provider ID: 100050011003
📍 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 925-9565
Effective as of 01-NOV-13

HUNT, TYRELLE, MD^F
Provider ID: 100417653002
📍 1701 E FLORIDA AVE
HEMET, CA 92544
☎ (951) 658-4486
📄 Spanish
Effective as of 01-NOV-23

MEHARDA, SANJIWANI, MD^F
Provider ID: 100327486019
📍 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 694-8549
📄 Hindi, Punjabi, Urdu
Effective as of 01-DEC-23

OBRIEN, KATHARINE, DO^{F†}
Provider ID: 100319273003
📍 1600 E FLORIDA AVE STE 103
HEMET, CA 92544
☎ (951) 929-8121
Effective as of 01-DEC-17

YUN, JONATHAN, DO^{M†}
Provider ID: 100025475025
📍 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 599-8532
📄 Korean, Spanish
Effective as of 01-NOV-20

YUN, JONATHAN, DO^{M†}
Provider ID: 100025475023
📍 255 N GILBERT ST STE C2
HEMET, CA 92543
☎ (951) 599-8532
📄 Korean, Spanish
Effective as of 01-AUG-20

GENERAL PRACTICE

EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885005
📍 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-SEP-15

EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885007
📍 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000
Effective as of 01-AUG-20

EL-HENAWI, IGLAL, MD^F
Provider ID: 100107885003
📍 4020 W FLORIDA AVE
HEMET, CA 92545
☎ (951) 765-5000

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-JAN-14

INTERNAL MEDICINE

BARVE, PRANAV, MD^{Mt}

Provider ID: 100318437028

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

☎ (951) 414-4011

🗣 Hindi, Marathi

Effective as of 01-AUG-21

BARVE, PRANAV, MD^{Mt}

Provider ID: 100318437029

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

☎ (951) 414-4011

🗣 Hindi, Marathi

Effective as of 01-AUG-21

BASAK, RYAN, MD^{Mt}

Provider ID: 100378970004

📍 2390 E FLORIDA AVE STE 104
HEMET, CA 92544

☎ (951) 414-4011

Effective as of 01-NOV-21

BATIN, FRANCES, MD^F

Provider ID: 100075999009

📍 1001 S STATE ST
HEMET, CA 92543

☎ (951) 925-2525

🗣 Spanish

Effective as of 01-NOV-23

CHING, TSUNG, MD^{Mt}

Provider ID: 100380049002

📍 1278 E LATHAM AVE
HEMET, CA 92543

☎ (951) 925-6625

🗣 Mandarin

Effective as of 01-DEC-21

CHODAY, PRITHI, MD^F

Provider ID: 100419896004

📍 1030 E FLORIDA AVE
HEMET, CA 92543

☎ (833) 867-4642

🗣 Telugu

Effective as of 01-DEC-23

CHODAY, PRITHI, MD^F

Provider ID: 100419896003

📍 422 N SAN JACINTO ST STE A
HEMET, CA 92543

☎ (833) 867-4642

🗣 Telugu

Effective as of 01-DEC-23

HUSSAIN, ABID, MD^{Mt}

Provider ID: 100108449003

📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543

☎ (951) 652-0060

🗣 Punjabi, Spanish, Urdu

Effective as of 01-SEP-15

KONDAPALLY, YAMUNA, MD

^{Ft}

Provider ID: 100364194002

📍 1701 E FLORIDA AVE
HEMET, CA 92544

☎ (951) 658-4486

Effective as of 01-DEC-20

KONDAPALLY, YAMUNA, MD

^{Ft}

Provider ID: 100364194003

📍 1701 E FLORIDA AVE
HEMET, CA 92544

☎ (951) 658-4486

Effective as of 01-DEC-20

MAPLETON, SHARINA, DO^F

Provider ID: 100384944006

📍 1030 E FLORIDA AVE

HEMET, CA 92543

☎ (833) 867-4642

Effective as of 01-FEB-24

MATHIAS, HERMAN, MD^{Mt}

Provider ID: 100037216007

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 929-6003

Effective as of 01-AUG-95

PATEL, REENABEN, MD^F

Provider ID: 100380064003

📍 2390 E FLORIDA AVE STE 101
HEMET, CA 92544

☎ (951) 925-1449

Effective as of 01-JAN-22

RAJA, MANIKANDA, MD^{Mt}

Provider ID: 100113362004

📍 1701 E FLORIDA AVE
HEMET, CA 92544

☎ (951) 658-4486

🗣 Tamil, Telugu

Effective as of 01-AUG-02

SALEH, HANA, MD^{Ft}

Provider ID: 100246071008

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 533-5123

🗣 Spanish

Effective as of 01-APR-24

SALEH, HANA, MD^{Ft}

Provider ID: 100246071002

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 533-5123

🗣 Spanish

Effective as of 01-SEP-15

SALEH, HANA, MD^{Ft}

Provider ID: 100246071007

C1. 網絡內提供者清單 初級保健提供者

391 N SAN JACINTO ST
HEMET, CA 92543
(951) 533-5123
Spanish
Effective as of 01-OCT-23

SHALABY, MOHSEN, MD^{M†}

Provider ID: 100306246002

1023 E FLORIDA AVE
HEMET, CA 92543
(951) 599-8403
Arabic

Effective as of 01-MAR-17

TAECHARVONGPHAIROJ, VEERAVAT, MD^M

Provider ID: 100226243030

850 E LATHAM AVE STE
205
HEMET, CA 92543
(951) 658-7205
Thai

Effective as of 01-MAR-24

TAECHARVONGPHAIROJ, VEERAVAT, MD^{M†}

Provider ID: 100226243018

1525 W FLORIDA AVE
HEMET, CA 92543
(951) 929-6777
Thai

Effective as of 01-OCT-21

TAECHARVONGPHAIROJ, VEERAVAT, MD^{M†}

Provider ID: 100226243007

903 E DEVONSHIRE AVE
HEMET, CA 92543
(951) 216-6100
Thai

Effective as of 01-AUG-20

TAECHARVONGPHAIROJ, VEERAVAT, MD^{M†}

Provider ID: 100226243015

422 N SAN JACINTO ST STE
A
HEMET, CA 92543
(951) 665-1100
Thai
Effective as of 01-APR-21

TAECHARVONGPHAIROJ, VEERAVAT, MD^{M†}

Provider ID: 100226243014

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
(808) 578-3911
Thai

Effective as of 01-APR-21

PEDIATRICS

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573009

750 E LATHAM AVE STE 1
HEMET, CA 92543
(951) 766-6696

Effective as of 01-AUG-20

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573003

750 E LATHAM AVE STE 1
HEMET, CA 92543
(951) 766-6696

Effective as of 01-OCT-10

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: PG0005455007

949 PALM AVE
IMPERIAL BEACH, CA 91932
(619) 429-3733
Teleservice

Effective as of 01-JUL-22

FAMILY PRACTICE

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039014

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
(949) 585-9870
Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039013

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
(949) 585-9870
Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039015

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
(949) 585-9870
Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^M

Provider ID: 100086039033

15825 LAGUNA CANYON
RD STE 104
IRVINE, CA 92618
(949) 585-9870
Korean, Spanish
Effective as of 01-OCT-23

HUANG, JANET, DO^F

Provider ID: 100007711005

18 ENDEAVOR STE 203
IRVINE, CA 92618
(949) 733-0168
Chinese, Mandarin,
Taiwanese

Effective as of 01-JUL-20

C1. 網絡內提供者清單 初級保健提供者

MACAULEY, TODD, DO^{M†}

Provider ID: 100337131058

8607 IRVINE CENTER DR
IRVINE, CA 92618

(949) 557-0600

Effective as of 01-JAN-21

NILI, ALAN, DO^M

Provider ID: 100093992004

18 ENDEAVOR STE 307
IRVINE, CA 92618

(949) 260-0106

Farsi, Spanish

Effective as of 01-JUL-12

NILI, ALAN, DO^M

Provider ID: 100093992002

18 ENDEAVOR STE 307
IRVINE, CA 92618

(949) 260-0106

Farsi, Spanish

Effective as of 01-JUL-12

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095027

16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095030

16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095026

16300 SAND CANYON AVE
STE 602

IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095032

16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095029

16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

(949) 783-1911

Farsi

Effective as of 01-JUN-19

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804009

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-JAN-17

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804011

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-JAN-18

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804017

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-APR-22

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804016

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-SEP-20

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804015

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-JUL-19

SHEIDAYI, PERRY, DO^{M†}

Provider ID: 100090804007

18 ENDEAVOR STE 201
IRVINE, CA 92618

(949) 650-5771

Farsi, Persian, Spanish

Effective as of 01-MAR-15

TONG, ELAIN, DO^{F†}

Provider ID: 100328017002

18 ENDEAVOR STE 304
IRVINE, CA 92618

(714) 556-8664

Chinese, Mandarin

Effective as of 01-MAY-18

YACOOB, MARLENE, MD^F

Provider ID: 100010305009

22 ODYSSEY STE 115
IRVINE, CA 92618

(949) 988-7550

French, Spanish




Teleservice

Effective as of 01-OCT-16




YACOOB, MARLENE, MD^F




Provider ID: 100010305018

C1. 網絡內提供者清單 初級保健提供者



 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 French, Spanish
Teleservice
Effective as of 01-JUN-19




GENERAL PRACTICE




ZAHEDI, MARCO, MD^M
Provider ID: 100308797011
 16520 BAKE PKWY STE 115
IRVINE, CA 92618
 (949) 857-4444
 Farsi, Spanish
Effective as of 01-MAR-23




ZAHEDI, MARCO, MD^M
Provider ID: 100308797010
 16520 BAKE PKWY STE 115
IRVINE, CA 92618
 (949) 857-4444
 Farsi, Spanish
Effective as of 01-MAR-23



INTERNAL MEDICINE



COUNCELBAUM, NANCY, MD^{F†}
Provider ID: 100061502007
 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
Effective as of 01-JAN-21




HUANG, CHARLIE, DO^M
Provider ID: 100325520007
 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
 Mandarin, Taiwanese
Effective as of 01-JAN-21

KAMADA, SATOSHI, MD^M
Provider ID: 100048942004
 15775 LAGUNA CANYON
RD STE 280
IRVINE, CA 92618
 (949) 453-1201
 Japanese
Effective as of 01-JUL-12




KAMADA, SATOSHI, MD^M
Provider ID: 100048942006
 15775 LAGUNA CANYON
RD STE 280
IRVINE, CA 92618
 (949) 453-1201
 Japanese
Effective as of 01-JUL-12



MEHTA, SHILPA, MD^{F†}
Provider ID: 100332508009
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 916-9100
Teleservice
Effective as of 01-JUN-19




MEHTA, SHILPA, MD^{F†}
Provider ID: 100332508010
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 916-9100
Teleservice
Effective as of 01-JUN-19




MIKHAIL, EMAD, MD^M
Provider ID: 100072526014
 22 ODYSSEY STE 140
IRVINE, CA 92618
 (949) 653-5810
 Arabic, Farsi
Effective as of 01-JUL-16




MIKHAIL, EMAD, MD^M
Provider ID: 100072526012


 22 ODYSSEY STE 140
IRVINE, CA 92618
 (949) 653-5810
 Arabic, Farsi
Effective as of 01-JUL-16

NAZARY, AREZOU, MD^F
Provider ID: 100411174002
 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
 (949) 791-3101
Effective as of 01-AUG-23

POURBABAK, SAM, MD^M
Provider ID: 100114265021
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Spanish
Teleservice
Effective as of 01-APR-24

POURBABAK, SAM, MD^M
Provider ID: 100114265020
 22 ODYSSEY STE 115
IRVINE, CA 92618
 (949) 988-7550
 Farsi, French, Spanish
Teleservice
Effective as of 01-APR-24

RASHID, AHSAN, MD^{M†}
Provider ID: 100036910003
 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
 (949) 753-1522
 Spanish, Urdu
Effective as of 01-JAN-18

SAISHO, ALBERT, MD^{M*}
Provider ID: 100077651006
 15785 LAGUNA CANYON
RD STE 340

C1. 網絡內提供者清單 初級保健提供者

IRVINE, CA 92618
☎ (949) 262-0080
📄 Japanese
Effective as of 01-OCT-22

SAISHO, ALBERT, MD^{M*}
Provider ID: 100077651004
📄 15785 LAGUNA CANYON
RD STE 340
IRVINE, CA 92618
☎ (949) 262-0080
📄 Japanese
Effective as of 01-JUL-12

SERAG, RANDA, MD^{F†}
Provider ID: 100136797017
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
Effective as of 01-JAN-21

SHUNE, HONG, MD^{F†}
Provider ID: 100196968014
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
☎ (949) 791-3101
📄 Chinese, Mandarin
Effective as of 01-JAN-21

SUN, YEMING, MD^{F*}
Provider ID: 100022013010
📄 113 WATERWORKS WAY
STE 125
IRVINE, CA 92618
☎ (949) 552-6788
📄 Mandarin
Effective as of 01-AUG-20

WANG, WEI, MD^M
Provider ID: 100345175004
📄 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

☎ (949) 791-3101
Effective as of 01-JAN-21

PEDIATRICS

BILLECI, BARTON, MD^{M†}
Provider ID: 100022620004
📄 16300 SAND CANYON AVE
STE 614
IRVINE, CA 92618
☎ (949) 653-1173
Effective as of 01-OCT-15

BILLECI, BARTON, MD^{M†}
Provider ID: 100022620005
📄 16300 SAND CANYON AVE
STE 614
IRVINE, CA 92618
☎ (949) 653-1173
Effective as of 01-JAN-18

FAMILY PRACTICE

AHMED, HEBA, DO^F
Provider ID: 100405870007
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📄 Hindi, Urdu
Teleservice
Effective as of 01-DEC-23

AHMED, HEBA, DO^F
Provider ID: 100405870003
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📄 Hindi, Urdu
Teleservice
Effective as of 01-JUN-23

AHMED, HEBA, DO^F
Provider ID: 100405870002

📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📄 Hindi, Urdu
Teleservice
Effective as of 01-MAY-23

AHMED, HEBA, DO^{F*}
Provider ID: 100405870005
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📄 Hindi, Urdu
Teleservice
Effective as of 01-NOV-23

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789010
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📄 Russian
Teleservice
Effective as of 01-MAY-21

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789012
📄 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📄 Russian
Teleservice
Effective as of 01-JUL-21

**DEMBO-SMEATON, ELENA,
MD^F**
Provider ID: 100112789011
📄 8950 VILLA LA JOLLA DR

C1. 網絡內提供者清單 初級保健提供者

STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
📠 Russian
Teleservice
Effective as of 01-JUL-21

GOLD, MARGARET, MD^M
Provider ID: 100231182005
📠 8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
☎ (858) 450-5900
Teleservice
Effective as of 01-APR-24

RIVERA, MIDORI, MD^F
Provider ID: 100111732028
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📠 Japanese, Spanish
Effective as of 01-DEC-23

**VAZQUEZ-BOJORQUEZ,
ALEJANDRA, MD^F**
Provider ID: 100391945014
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
📠 Spanish
Effective as of 01-APR-23

WU, ARMANDO, MD^M
Provider ID: 100381137002
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 French, Italian, Spanish
Teleservice
Effective as of 01-DEC-21

WU, ARMANDO, MD^M
Provider ID: 100381137010
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 French, Italian, Spanish
Teleservice
Effective as of 01-OCT-23

WU, ARMANDO, MD^M
Provider ID: 100381137007
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 French, Italian, Spanish
Teleservice
Effective as of 01-MAR-22

WU, ARMANDO, MD^M
Provider ID: 100381137006
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 French, Italian, Spanish
Teleservice
Effective as of 01-MAR-22

GENERAL PRACTICE

WU, ARMANDO, MD^M
Provider ID: 100381137005
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 French, Italian, Spanish
Teleservice
Effective as of 01-FEB-22

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{F†}

Provider ID: 100358544010
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 864-9800
📠 Spanish
Effective as of 01-NOV-22

BADALYAN, SEDA, MD^{F†}
Provider ID: 100032508021
📠 9850 GENESEE AVE STE
740
LA JOLLA, CA 92037
☎ (858) 457-5555
📠 Armenian, Russian
Effective as of 01-DEC-21

BADALYAN, SEDA, MD^{F†}
Provider ID: 100032508023
📠 9850 GENESEE AVE STE
740
LA JOLLA, CA 92037
☎ (858) 457-5555
📠 Armenian, Russian
Effective as of 01-SEP-22

RANA, SHAUNAK, MD^{M††}
Provider ID: 100194770019
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
Effective as of 01-NOV-21

RANA, SHAUNAK, MD^{M††}
Provider ID: 100194770021
📠 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ (858) 554-1212
Effective as of 01-FEB-22

RANA, SHAUNAK, MD^{M††}
Provider ID: 100194770013
📠 7855 IVANHOE AVE STE 110

C1. 網絡內提供者清單 初級保健提供者

LA JOLLA, CA 92037
☎ (858) 799-0933
Effective as of 01-JAN-21

RANA, SHAUNAK, MD^{M†}
Provider ID: 100194770022
📍 7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
☎ (858) 799-0933
Effective as of 01-SEP-22

FAMILY PRACTICE

KISKILA, NATHAN, MD^M
Provider ID: 100138189015
📍 6136 LAKE MURRAY BLVD
LA MESA, CA 91942
☎ (949) 760-9222
📄 Spanish
Effective as of 01-JAN-24

PATEL, HEMANSHU, MD^M
Provider ID: 100282252013
📍 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
☎ (619) 698-0606
Effective as of 01-MAR-24

FQHC

LA MESA PEDIATRICS,
Provider ID: PG0092627004
📍 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942
☎ (619) 464-6434
Effective as of 01-JAN-21

INTERNAL MEDICINE

ALAMAR, ALI, MD^{M†}
Provider ID: 100106664014
📍 5565 GROSSMONT
CENTER DR BLDG 1 STE 105
LA MESA, CA 91942

☎ (619) 724-6644
📄 Arabic, Spanish
Effective as of 01-SEP-20

NGUYEN, DAT, MD^M
Provider ID: 100047564021
📍 5565 GROSSMONT
CENTER DR STE 229
LA MESA, CA 91942
☎ (858) 349-3760
📄 Spanish, Vietnamese
Effective as of 01-MAR-24

SHAHBAZ, MAJID, MD^M
Provider ID: 100090790008
📍 8851 CENTER DR STE 408
LA MESA, CA 91942
☎ (619) 583-1174
📄 Faroese, Farsi, Tagalog
Effective as of 01-MAR-18

SHAHBAZ, MAJID, MD^M
Provider ID: 100090790020
📍 8851 CENTER DR STE 408
LA MESA, CA 91942
☎ (619) 583-1174
📄 Faroese, Farsi, Tagalog
Effective as of 01-MAR-23

SHAHBAZ, MAJID, MD^M
Provider ID: 100090790018
📍 8851 CENTER DR STE 408
LA MESA, CA 91942
☎ (619) 583-1174
📄 Faroese, Farsi, Tagalog
Effective as of 01-JAN-21

SHAHBAZ, MAJID, MD^M
Provider ID: 100090790019
📍 8851 CENTER DR STE 408
LA MESA, CA 91942
☎ (619) 583-1174
📄 Faroese, Farsi, Tagalog
Effective as of 01-JAN-21

FAMILY PRACTICE

WAINWRIGHT, MITCHELL, MD^M
Provider ID: 100096772018
📍 800 CORPORATE DR STE
100
LADERA RANCH, CA 92694
☎ (949) 364-9112
📄 Spanish
Effective as of 01-SEP-18

INTERNAL MEDICINE

ELSANADI, RAEF, MD^{M††}
Provider ID: 100040631004
📍 333 CORPORATE DR STE
210
LADERA RANCH, CA 92694
☎ (949) 364-3582
📄 Arabic
Effective as of 01-SEP-19

FAMILY PRACTICE


PANITCH, JILL, MD^{F*}
Provider ID: 100059699012
📍 370 OCEAN AVE
LAGUNA BEACH, CA 92651
☎ (949) 557-0610
Effective as of 01-JAN-21

SZYMANSKI, JARED, DO^M
Provider ID: 100369042016
📍 370 OCEAN AVE
LAGUNA BEACH, CA 92651
☎ (949) 557-0610
Effective as of 01-AUG-21

INTERNAL MEDICINE



DEWING, JANNE, MD^F
Provider ID: 100105400007
📍 31862 COAST HWY STE 200
LAGUNA BEACH, CA 92651

C1. 網絡內提供者清單 初級保健提供者



 (949) 340-5454
Effective as of 01-AUG-18



FAMILY PRACTICE



CHANG, MICHAEL, DO^{M†}
Provider ID: 100294076006



 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
 (949) 448-0656
Effective as of 01-AUG-18



CHANG, MICHAEL, DO^{M††}
Provider ID: 100294076007



 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
 (949) 448-0656
Effective as of 01-AUG-18



FOSTER, MARK, MD^M
Provider ID: 100108418005
 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
 (949) 373-7799
Effective as of 01-JAN-18



GEE, KELLY, DO^{F†}
Provider ID: 100358387006
 23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653
 (949) 305-2660
Effective as of 01-FEB-22




HICKS, TOMMY, MD^{M††}
Provider ID: 100093348004
 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
 (949) 588-7262
Effective as of 01-JAN-18



HUYNH, JUDY, DO^{F†}
Provider ID: 100065290005
 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
 (949) 768-4850
Effective as of 01-JAN-18

HUYNH, JUDY, DO^{F†}
Provider ID: 100065290003
 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
 (949) 768-4850
Effective as of 01-APR-12




IERARDI, STEPHEN, MD^M
Provider ID: 100017573010
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
Effective as of 01-APR-22




IERARDI, STEPHEN, MD^M
Provider ID: 100017573009
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
Effective as of 01-APR-22



KHOSHREZA, HALEH, MD^{F†}
Provider ID: 100383918002
 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
 (949) 448-0656
 Farsi, German
Effective as of 01-MAR-22



LEISH, BRIAN, MD^M
Provider ID: 100103119055
 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
 (949) 373-7799



Effective as of 01-JAN-18

MANDEL, RONALD, DO^{M†}
Provider ID: 100034539004
 25411 CABOT RD STE 115
LAGUNA HILLS, CA 92653
 (949) 362-2121
 Spanish
Effective as of 01-JAN-18

MOHINDRA, SUCHITRA, MD^{F†}
Provider ID: 100025171005
 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
 (949) 448-0656
 Hindi, Hindustani, Punjabi
Effective as of 01-AUG-18




MUNIB, SABEEN, MD^{F†}
Provider ID: 100168805028
 23181 LA CADENA DR STE
101
LAGUNA HILLS, CA 92653
 (949) 647-5234
Effective as of 01-OCT-20

MUNIB, SABEEN, MD^{F†}
Provider ID: 100168805025
 23181 LA CADENA DR STE
101
LAGUNA HILLS, CA 92653
 (949) 647-5234
Effective as of 01-FEB-20



MUNIB, SABEEN, MD^{F†}
Provider ID: 100168805030
 23181 LA CADENA DR STE
101
LAGUNA HILLS, CA 92653
 (949) 647-5234
Effective as of 01-MAR-21

RIVERO, JORGE, MD^M
Provider ID: 100059240008



C1. 網絡內提供者清單 初級保健提供者

 23521 PASEO VALENCIA
108
LAGUNA HILLS, CA 92653
 (949) 588-7262
 Spanish
Effective as of 01-JAN-18




SY, JOAN, DO^F

Provider ID: 100090936014
 24953 PASEO DE
VALENCIA STE 1A
LAGUNA HILLS, CA 92653
 (949) 460-9200
Effective as of 01-JAN-18




SY, JOAN, DO^F

Provider ID: 100090936012
 24953 PASEO DE
VALENCIA STE 1A
LAGUNA HILLS, CA 92653
 (949) 460-9200
Effective as of 01-JAN-17

YACOOB, MARLENE, MD^F




Provider ID: 100010305019
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 French, Spanish
Teleservice
Effective as of 01-JUL-19

YACOOB, MARLENE, MD^F




Provider ID: 100010305008
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 French, Spanish
Teleservice
Effective as of 01-APR-18

GENERAL PRACTICE




COOKE, LAWRENCE, MD^{M*}

Provider ID: 100030436004
 23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
 (949) 215-1511
 Spanish
Effective as of 01-NOV-19



HARMS, MONICA, MD^F

Provider ID: 100088859016
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Spanish
Effective as of 01-JUN-19



HARMS, MONICA, MD^F

Provider ID: 100088859020
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Spanish
Effective as of 01-SEP-20

NAPOLI, LYNN, MD^F




Provider ID: 100069369009
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
Teleservice
Effective as of 01-AUG-18

NAPOLI, LYNN, MD^F




Provider ID: 100069369008
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
Teleservice
Effective as of 01-JUL-18

INTERNAL MEDICINE




AFSHAR, YAMA, DO^M

Provider ID: 100395461002
 24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
 (949) 204-3006
 Korean
Effective as of 01-OCT-22




ARTHUR, KRISTINE, MD^{F†}

Provider ID: 100108743004
 24268 EL TORO RD
LAGUNA HILLS, CA 92637
 (657) 241-8455
 French
Effective as of 01-FEB-20




ASHTARI, MOZHGAN, MD^{F†}

Provider ID: 100114417022
 23141 MOULTON PKWY STE
202
LAGUNA HILLS, CA 92653
 (949) 600-6334
 Farsi
Effective as of 01-JAN-18

BANDUKWALA, RAHIL, DO^{M†}

Provider ID: 100036312009
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Spanish
Effective as of 01-APR-18

BANDUKWALA, RAHIL, DO^{M†}

Provider ID: 100036312016
 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
 (949) 916-9100
 Spanish
Effective as of 01-JUN-19

BROWN, HOSEA, MD^{M†}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100017878015
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JUN-17

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878018
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JUN-18

BROWN, HOSEA, MD^{M††}
Provider ID: 100017878005
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-DEC-11

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878016
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JAN-18

BROWN, HOSEA, MD^{M†}
Provider ID: 100017878007
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
Spanish
Effective as of 01-JAN-14

CHANG, KU JUEY, MD^M
Provider ID: 100079645013
23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
(949) 916-9100

Chinese
Effective as of 01-JUN-19

CHANG, KU JUEY, MD^M
Provider ID: 100079645006
23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
(949) 916-9100
Chinese
Effective as of 01-NOV-16

CLARK, LORI, MD^{F††}
Provider ID: 100054653006
23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
(949) 588-7262
Spanish
Effective as of 01-JAN-18

COVARRUBIAS, GRACIA, MD^{F†}
Provider ID: 100109548017
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-SEP-21

COVARRUBIAS, GRACIA, MD^{F†}
Provider ID: 100109548016
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
Spanish
Effective as of 01-MAR-20

DABESTANI, ALI, MD^{M†}
Provider ID: 100009145010
25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
(949) 770-4858
Effective as of 01-JUL-14

DAIGNEAULT, ARTHUR, MD^M

Provider ID: 100099113005
24221 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
(949) 588-8700
Spanish
Effective as of 01-JAN-18

EDRIS, MARWAN, MD^M
Provider ID: 100083033005
25283 CABOT RD STE 106
LAGUNA HILLS, CA 92653
(949) 364-9080
Arabic, Hebrew
Effective as of 01-JAN-18


FELDMAN, ROBERT, MD^{M*}
Provider ID: 100016238005
23961 CALLE DE LA
MAGDALENA STE 429
LAGUNA HILLS, CA 92653
(949) 452-1930
Effective as of 01-MAR-19

FERNANDEZ, RAYMOND, MD^M
Provider ID: 100067842005
24221 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
(949) 420-5985
Effective as of 01-JAN-18

HENRY, BRIAN, MD^M
Provider ID: 100063427004
24221 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
(949) 588-8700
Effective as of 01-JAN-18

HUSEBY, DAVID, MD^M
Provider ID: 100091780005
24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653


C1. 網絡內提供者清單 初級保健提供者


 (949) 373-7799


Effective as of 01-JAN-18

JAVAHERI, MANIJEH, MD^{F†}

Provider ID: 100111565009

 23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653


 (949) 770-8100


 Farsi, Turkish


Effective as of 01-JAN-18

KAURA, MAYA, MD^F

Provider ID: 100011471005

 24953 PASEO DE
VALENCIA STE 22A
LAGUNA HILLS, CA 92653

 (949) 770-7333


 Hindi


Effective as of 01-MAR-21

LEW, HOMER, DO^{M†}

Provider ID: 100088621006

 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

 (949) 588-7262


 Cantonese, Chinese

Effective as of 01-JAN-18

LIN, CHI WHEI, MD^{M*}

Provider ID: 100090449006

 23521 PASEO DE VALENCIA
STE 310
LAGUNA HILLS, CA 92653


 (949) 716-4555


 Chinese, Mandarin, Spanish

Effective as of 01-JAN-18

LO, ALAN, MD^{M*}

Provider ID: 100022892004

 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

 (949) 768-4850


Effective as of 01-JAN-18

MANASSON, KATHERINE, MD

F†

Provider ID: 100113316013

 24422 AVENIDA DE LA
CARLOTA STE 272
LAGUNA HILLS, CA 92653

 (949) 446-6783


 Russian


Effective as of 01-NOV-22

MANASSON, KATHERINE, MD

F†

Provider ID: 100113316016

 24422 AVENIDA DE LA
CARLOTA STE 272
LAGUNA HILLS, CA 92653

 (949) 446-6783


 Russian


Effective as of 01-NOV-22

MANASSON, KATHERINE, MD

F†

Provider ID: 100113316014

 24422 AVENIDA DE LA
CARLOTA STE 272
LAGUNA HILLS, CA 92653


 (949) 446-6783


 Russian

Effective as of 01-NOV-22

MEHTA, SHILPA, MD^{F†}

Provider ID: 100332508008

 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

 (949) 916-9100


Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD^{F†}

Provider ID: 100332508007

 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653


 (949) 916-9100


Teleservice

Effective as of 01-JUN-19

PACE, SARAH, MD^{F†}

Provider ID: 100322536002

 24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653


 (949) 204-3006


 Spanish


Effective as of 01-AUG-22

POURBABAK, SAM, MD^M

Provider ID: 100114265008

 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

 (949) 855-2279


 Farsi, French, Spanish


Teleservice

Effective as of 01-APR-18

POURBABAK, SAM, MD^M

Provider ID: 100114265015

 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

 (949) 855-2279

 Farsi, French, Spanish


Teleservice


Effective as of 01-JUN-19

SADEGHI TARI, MAHYAR, MD^{F†}

Provider ID: 100107614005

 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653

 (949) 334-8200

 Farsi, Spanish, Swedish

Effective as of 01-JAN-18

SIU, CURTIS, MD^{M*}

Provider ID: 100082780005

 24221 CALLE DE LA LOUISA

C1. 網絡內提供者清單

初級保健提供者

STE 200
LAGUNA HILLS, CA 92653
☎ (949) 420-5988
📄 Chinese
Effective as of 01-JAN-18

STALLWORTH, ROXANNE, MD^{F†}

Provider ID: 100185861010
📄 24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653
☎ (949) 204-3006
📄 Farsi, Spanish
Effective as of 01-AUG-22

STERNS, DANIEL, MD^M

Provider ID: 100081005004
📄 24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
☎ (949) 373-7799
📄 Spanish
Effective as of 01-JAN-18

STRODTBECK, PAUL, MD^M

Provider ID: 100033007005
📄 24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
☎ (949) 373-7799
Effective as of 01-JAN-18

TRAN, CECILIA, MD^{F*}

Provider ID: 100105245004
📄 24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
☎ (949) 420-5980
📄 Vietnamese
Effective as of 01-JAN-18

ZAMANI, MAZIAR, MD^{M*}

Provider ID: 100086365005
📄 24221 CALLE DE LA LOUISA

STE 400
LAGUNA HILLS, CA 92653
☎ (949) 770-2085
Effective as of 01-JAN-18

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573005
📄 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
☎ (949) 273-8085
Effective as of 01-APR-18

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573002
📄 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
☎ (949) 273-8085
Effective as of 01-JAN-13

FAMILY PRACTICE

BEDRAN, ASAD, DO^{M†}

Provider ID: 100347139005
📄 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
☎ (949) 643-9111
Effective as of 01-SEP-20

BELLO, JUSTINE, MD^{F†}

Provider ID: 100281688002
📄 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
☎ (949) 643-9111
Effective as of 01-SEP-16

BREWER, SARAH, MD^{F†}

Provider ID: 100281677007
📄 32341 GOLDEN LANTERN STE D
LAGUNA NIGUEL, CA 92677
☎ (949) 363-9595
Effective as of 01-FEB-21

FU, KAREN, MD^{F†}

Provider ID: 100095684012

📄 32341 GOLDEN LANTERN STE D
LAGUNA NIGUEL, CA 92677
☎ (949) 363-9595
📄 Mandarin, Spanish
Effective as of 01-JUN-22

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

Provider ID: 100197006032
📄 27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677
☎ (949) 831-0300
📄 Dutch, Farsi
Effective as of 01-OCT-22

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

Provider ID: 100197006031
📄 27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677
☎ (949) 831-0300
📄 Dutch, Farsi
Effective as of 01-OCT-19

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

Provider ID: 100197006024
📄 27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677
☎ (949) 831-0300
📄 Dutch, Farsi
Effective as of 01-OCT-19

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

Provider ID: 100197006023
📄 27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677
☎ (949) 831-0300
📄 Dutch, Farsi
Effective as of 01-SEP-19

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100197006028

27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677

(949) 831-0300

Dutch, Farsi

Effective as of 01-SEP-19

HAGHIGHI MOTLAGH, BEHNAZ, MD^F

Provider ID: 100197006019

27781 LA PAZ RD
LAGUNA NIGUEL, CA 92677

(949) 831-0300

Dutch, Farsi

Effective as of 01-JUN-19

LEE, SUSAN, MD^{F†}

Provider ID: 100068409006

27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677

(949) 643-9111

Effective as of 01-JUL-14

SALL, JEEVAN, MD^{M†}

Provider ID: 100353204063

27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677

(949) 643-9111

Effective as of 01-JUN-22

INTERNAL MEDICINE

BILAL, BASSAM, MD^{M†}

Provider ID: 100327805022

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677

(949) 495-7144

Arabic, Spanish

Effective as of 01-FEB-19

KELLOGG, CHERYL, MD^F

Provider ID: 100082360006

30131 TOWN CENTER DR
STE 204

LAGUNA NIGUEL, CA 92677

(949) 342-1780

Effective as of 01-JAN-18

KRAFCIK, SONJA, MD^{F†}

Provider ID: 100056351004

25500 RANCHO NIGUEL
RD STE 150
LAGUNA NIGUEL, CA 92677

(949) 831-3686

Effective as of 01-OCT-22

KRAFCIK, SONJA, MD^{F†}

Provider ID: 100056351002

25500 RANCHO NIGUEL
RD STE 150
LAGUNA NIGUEL, CA 92677

(949) 831-3686

Effective as of 01-MAR-13

PEDIATRICS

PATEL, JYOTINKUMAR, MD^{M†}

Provider ID: 100035402010

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677

(949) 495-7144

Gujarati, Hindi

Effective as of 01-SEP-22

FAMILY PRACTICE

VAN VRANKEN, BRUCE, MD^M

Provider ID: 100074767005

24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

(949) 837-7521

Effective as of 01-JAN-18

INTERNAL MEDICINE

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408009

24268 EL TORO RD
LAGUNA WOODS, CA

92637

(657) 241-8455

Farsi

Effective as of 01-JAN-21

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408008

24268 EL TORO RD
LAGUNA WOODS, CA
92637

(657) 241-8455

Farsi

Effective as of 01-JAN-21

SIEGFRIED, TRACY, MD^F

Provider ID: 100047456004

24331 EL TORO RD STE 330
LAGUNA WOODS, CA
92637

(949) 716-0833

Effective as of 01-JAN-18

FAMILY PRACTICE

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861006

31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530

(951) 674-1505

Tagalog

Effective as of 01-NOV-11

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138016

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

(951) 471-1800

Korean, Mandarin, Spanish

Effective as of 01-DEC-14

TORRES, REBECCA, MD^{F†}

Provider ID: 100187138015

31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

(951) 471-1800

C1. 網絡內提供者清單 初級保健提供者

☐ Korean, Mandarin, Spanish
Effective as of 01-DEC-14

GENERAL PRACTICE

ASPREC, JOSEPH, MD^{M†}

Provider ID: 100070994004

☐ 31571 CANYON ESTATES DR
STE 132
LAKE ELSINORE, CA 92532
☎ (951) 674-7811
☐ Spanish, Tagalog
Effective as of 01-JUL-22

MONARREZ, DAVID, MD^{M†}

Provider ID: 100102954012

☐ 31739 RIVERSIDE DR STE A1
LAKE ELSINORE, CA 92530
☎ (951) 245-0505
☐ Spanish
Effective as of 01-OCT-18

MONARREZ, DAVID, MD^{M†}

Provider ID: 100102954016

☐ 31739 RIVERSIDE DR STE A1
LAKE ELSINORE, CA 92530
☎ (951) 245-0505
☐ Spanish
Effective as of 01-NOV-20

OLIVEIRA, THOMAS, DO^{M†}

Provider ID: 100088827007

☐ 506 W GRAHAM AVE STE
107
LAKE ELSINORE, CA 92530
☎ (951) 471-5116
☐ Italian, Spanish
Effective as of 01-APR-21

INTERNAL MEDICINE

BAJWA, SAIF, MD^{M†}

Provider ID: 100113080002

☐ 16800 LAKESHORE DR STE
2

LAKE ELSINORE, CA 92530
☎ (951) 674-2155
☐ Spanish, Urdu
Effective as of 01-APR-17

SAADAT, FARID, MD^{M†}

Provider ID: 100013848002

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
☎ (951) 471-5711
☐ Farsi, Persian
Effective as of 01-JUN-14

FAMILY PRACTICE

AHSAN, NUSRAT, MD^{F†}

Provider ID: 100113788007

☐ 22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
☎ (949) 242-6902
☐ Hindi
Effective as of 01-MAY-17

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282032

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-OCT-17

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282030

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-18

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282029

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301

☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-17

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282026

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-16

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282022

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-14

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282027

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-DEC-16

ALI, MOHAMMED, MD^{M†}

Provider ID: 100114282064

☐ 23672 BIRTCHE DR STE A
LAKE FOREST, CA 92630
☎ (949) 770-7301
☐ Hindi, Telugu, Urdu
Effective as of 01-OCT-22

KOUMAS, MARY, DO^{F†}

Provider ID: 100089870008

☐ 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
☎ (949) 770-1950
Effective as of 01-MAR-22

KOUMAS, JOHN, DO^{M††}

Provider ID: 100064961008

C1. 網絡內提供者清單 初級保健提供者

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
(949) 770-1950
Spanish
Effective as of 01-MAR-22

INTERNAL MEDICINE

GOVASHIRI, REZA, MD^{M†}
Provider ID: 100047181008

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
(949) 242-6902
Farsi, Spanish
Effective as of 01-JUL-19

MUY, MADINETH, MD^{F†}
Provider ID: 100082949013

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
(949) 242-6902
Khmer
Effective as of 01-OCT-18

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F
Provider ID: 100320650014

10039 VINE ST
LAKESIDE, CA 92040
(619) 390-9975
Spanish
Effective as of 01-FEB-24

PHAM, CHRISTINE, DO^F
Provider ID: 100397531003

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Effective as of 01-JAN-23

FQHC

**NEIGHBORHOOD
HEALTHCARE LAKESIDE, ***
Provider ID: PG0024990051

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE

MCFARLAND, NATHAN, MD^M
Provider ID: 100216268004

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Italian, Spanish
Effective as of 01-AUG-20

MCFARLAND, NATHAN, MD^M
Provider ID: 100216268007

10039 VINE ST
LAKESIDE, CA 92040
(858) 218-3000
Italian, Spanish
Effective as of 01-JAN-24

FQHC

**LEMON GROVE FAMILY
HEALTH CENTER,**
Provider ID: PG0085568003

7592 BROADWAY
LEMON GROVE, CA 91945
(619) 515-2550
Effective as of 01-JAN-21

FAMILY PRACTICE

ARIF, MUHAMMAD, MD^M
Provider ID: 100114105045

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Punjabi, Spanish, Urdu

Effective as of 01-OCT-23

ARIF, MUHAMMAD, MD^M
Provider ID: 100114105044

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Punjabi, Spanish, Urdu
Effective as of 01-OCT-23

CAMARILLO, DANIEL, MD^{M†}
Provider ID: 100110735009

30420 HAUN RD
MENIFEE, CA 92584
(951) 676-4193
Spanish
Effective as of 01-OCT-15

CAMARILLO, DANIEL, MD^{M†}
Provider ID: 100110735017

30420 HAUN RD
MENIFEE, CA 92584
(951) 676-4193
Spanish
Effective as of 01-NOV-20

GOHIL, RAJIT, MD^M
Provider ID: 100391418014

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Effective as of 01-JUL-23

GOHIL, RAJIT, MD^M
Provider ID: 100391418013

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020
Effective as of 01-JUL-23




HARRISON, AMY, MD^F
Provider ID: 100410706004

29826 HAUN RD STE 200
MENIFEE, CA 92586
(951) 414-4020



C1. 網絡內提供者清單 初級保健提供者

 Spanish
Effective as of 01-AUG-23



HARRISON, AMY, MD^F

Provider ID: 100410706003
 29826 HAUN RD STE 200
MENIFEE, CA 92586
 (951) 414-4020
 Spanish
Effective as of 01-AUG-23



HARRISON, AMY, MD^{F†}

Provider ID: 100047360077
 28400 MCCALL BLVD STE
B10
MENIFEE, CA 92585
 (951) 414-4020
Effective as of 01-OCT-22




HARRISON, AMY, MD^{F†}

Provider ID: 100047360076
 28400 MCCALL BLVD STE
B10
MENIFEE, CA 92585
 (951) 414-4020
Effective as of 01-OCT-22

MADRID, RICHARD, MD^{M†}




Provider ID: 100077741007
 30420 HAUN RD
MENIFEE, CA 92584
 (951) 676-4193
Teleservice
Effective as of 01-JAN-16

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617007
 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
 (951) 216-2200
 Spanish
Effective as of 01-DEC-22




ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617009




 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
 (951) 216-2200
 Spanish
Effective as of 01-DEC-22

INTERNAL MEDICINE




ARANETA, TOMAS, MD^{M†}

Provider ID: 100036305006
 29826 HAUN RD STE 201
MENIFEE, CA 92586
 (951) 301-1100
 Spanish, Tagalog
Effective as of 01-OCT-22



BARVE, PRANAV, MD^M

Provider ID: 100318437033
 29826 HAUN RD STE 200
MENIFEE, CA 92586
 (951) 414-4020
 Hindi, Marathi
Effective as of 01-JUL-23


BARVE, PRANAV, MD^M


Provider ID: 100318437034
 29826 HAUN RD STE 200
MENIFEE, CA 92586
 (951) 414-4020
 Hindi, Marathi
Effective as of 01-JUL-23

BASAK, RYAN, MD^M



Provider ID: 100378970016
 29826 HAUN RD STE 200
MENIFEE, CA 92586
 (951) 414-4020
Effective as of 01-JUL-23

BASAK, RYAN, MD^M




Provider ID: 100378970015
 29826 HAUN RD STE 200
MENIFEE, CA 92586

 (951) 414-4020
Effective as of 01-JUL-23




GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580006
 29798 HAUN RD STE 106
MENIFEE, CA 92586
 (951) 301-3588
Effective as of 01-JUN-17



GONZALES, EDIVINA, MD^F

Provider ID: 100039220006
 29798 HAUN RD STE 106
MENIFEE, CA 92586
 (951) 301-3588
 Spanish, Tagalog
Effective as of 01-JAN-11



GONZALES, EDIVINA, MD^F

Provider ID: 100039220005
 29798 HAUN RD STE 106
MENIFEE, CA 92586
 (951) 301-3588
 Spanish, Tagalog
Effective as of 01-OCT-10



GONZALES, PATRICK, MD^{M†}

Provider ID: 100109580005
 29798 HAUN RD STE 106
MENIFEE, CA 92586
 (951) 301-3588
Effective as of 01-SEP-10

KIM, IRENE, DO^F

Provider ID: 100380710004
 27190 SUN CITY BLVD
MENIFEE, CA 92586
 (951) 676-4193
Effective as of 01-JAN-22

MARTINEZ, JORGE, MD^{M†}



Provider ID: 100096235012
 29826 HAUN RD STE 201
MENIFEE, CA 92586
 (951) 301-1100

C1. 網絡內提供者清單 初級保健提供者




 Spanish
Effective as of 01-JUN-22

FAMILY PRACTICE




BALL-ZONDERVAN, MONICA, MD^{F†}

Provider ID: 100294482047
 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
 (949) 364-7246
Effective as of 01-SEP-19




BARE, IAN, MD^{M†}

Provider ID: 100110113009
 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
 (949) 542-7700
 Spanish
Effective as of 01-JUN-21


BARE, IAN, MD^{M††}

Provider ID: 100110113017
 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
 (949) 542-7700
 Spanish
Effective as of 01-JUN-21

BASICH, CANDACE, MD^{F††}



Provider ID: 100073084008
 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694
 (657) 241-8435
 Spanish
Effective as of 01-SEP-18

BASICH, CANDACE, MD^{F††}



Provider ID: 100073084010
 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694
 (657) 241-8435

 Spanish
Effective as of 01-DEC-21



BISUNA, BLANCA, MD^{F††}

Provider ID: 100199166013
 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
 (949) 364-7246
Effective as of 01-MAR-16



CHO, ANTHONY, MD^{M†}

Provider ID: 100326978002
 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694
 (657) 241-8601
Effective as of 01-APR-18




CUENCA, ARNOLD, DO^{M†}

Provider ID: 100103510019
 23512 MADERO
MISSION VIEJO, CA 92691
 (949) 583-1600
Effective as of 01-JUL-18



CUENCA, ARNOLD, DO^{M††}

Provider ID: 100103510027
 23512 MADERO
MISSION VIEJO, CA 92691
 (949) 583-1600
Effective as of 01-JAN-23

DELNITZ, DANUTA, MD^F



Provider ID: 100109319011
 26691 PLAZA STE 140
MISSION VIEJO, CA 92691
 (949) 240-8555
 Polish, Spanish
Effective as of 01-APR-19

DELNITZ, DANUTA, MD^F




Provider ID: 100109319012
 26691 PLAZA STE 140
MISSION VIEJO, CA 92691
 (949) 240-8555

 Polish, Spanish
Effective as of 01-APR-19




ENDSLEY, DELVIN, MD^M

Provider ID: 100413682015
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
Effective as of 01-MAR-24




FIGHTLIN, STEFANIE, DO^{F†}

Provider ID: 100086847010
 26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
 (949) 582-5430
 Spanish
Effective as of 01-JAN-18



FLORES, TERESA, MD^{F†}

Provider ID: 100207722054
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
 Spanish
Effective as of 01-DEC-19

FLORES, TERESA, MD^{F†}

Provider ID: 100207722053
 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
 (949) 270-2100
 Spanish
Effective as of 01-DEC-19

GEBHARD, KARL, MD^M

Provider ID: 100071312010
 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
 (949) 305-0110
Effective as of 01-JAN-18

C1. 網絡內提供者清單 初級保健提供者

GEBHARD, KARL, MD^M

Provider ID: 100071312004

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-MAR-16

GEBHARD, KARL, MD^M

Provider ID: 100071312013

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312012

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-JUN-19

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104012

📍 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

☎ (949) 916-8870

📱 Spanish

Effective as of 01-OCT-22

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104009

📍 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

☎ (949) 916-8870

📱 Spanish

Effective as of 01-JAN-17

GLOBUS, JEFFREY, MD^M

Provider ID: 100008104004

📍 26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691

☎ (949) 916-8870

📱 Spanish

Effective as of 01-DEC-14

GONZALEZ, DAVID, MD^{M†}

Provider ID: 100096155006

📍 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

☎ (949) 364-7246

Effective as of 01-OCT-18

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908013

📍 23512 MADERO
MISSION VIEJO, CA 92691

☎ (949) 583-1600

📱 Hindi, Punjabi, Spanish

Effective as of 01-SEP-21

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908011

📍 23512 MADERO
MISSION VIEJO, CA 92691

☎ (949) 583-1600

📱 Hindi, Punjabi, Spanish

Effective as of 01-NOV-19

LY, PHUONG, MD^{M†}

Provider ID: 100354280025

📍 26800 CROWN VALLEY
PKWY STE 150
MISSION VIEJO, CA 92691

☎ (949) 276-2111

📱 Vietnamese

Effective as of 01-AUG-22

PEDARSANI, MARJAN, DO^{F††}

Provider ID: 100113548005

📍 23512 MADERO
MISSION VIEJO, CA 92691

☎ (949) 583-1600

📱 Farsi

Effective as of 01-MAY-12

PEDARSANI, MARJAN, DO^{F††}

Provider ID: 100113548012

📍 23512 MADERO
MISSION VIEJO, CA 92691

☎ (949) 583-1600

📱 Farsi

Effective as of 01-SEP-21

RUTTEN, SONIA, MD^F

Provider ID: 100414034002

📍 30492 GATEWAY PL
STE 110
MISSION VIEJO, CA 92694

☎ (949) 542-7700

Effective as of 01-OCT-23

SAMOORI, RAMA, DO^{F†}

Provider ID: 100112028003

📍 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

☎ (949) 364-7246

📱 Farsi, Spanish

Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD^F

Provider ID: 100396167003

📍 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691

☎ (949) 582-5430

📱 Farsi, Persian

Effective as of 01-MAR-23

THOMAS, CHERYL, MD^F

Provider ID: 100043536017

📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

☎ (949) 270-2100

Effective as of 01-AUG-21

THOMAS, CHERYL, MD^F

Provider ID: 100043536023

📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

☎ (949) 270-2100

Effective as of 01-AUG-21

C1. 網絡內提供者清單 初級保健提供者

THOMAS, CHERYL, MD^F

Provider ID: 100043536021
27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-AUG-21

THOMAS, CHERYL, MD^F

Provider ID: 100043536022
27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-AUG-21

THOMAS, CHERYL, MD^F

Provider ID: 100043536012
27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-JUL-21

THOMAS, CHERYL, MD^F

Provider ID: 100043536011
27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-JUL-21

YAZDANSHENAS, MARYAM, MD^{F†}

Provider ID: 100224906005
30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
(949) 542-7700
Farsi
Effective as of 01-AUG-20

GENERAL PRACTICE

JANISZEWSKI, EVA, MD^F

Provider ID: 100079209004
24896 CHRISANTA DR STE
130
MISSION VIEJO, CA 92691
(949) 458-2992
Polish, Spanish
Effective as of 01-JAN-18

INTERNAL MEDICINE

ALLAMEHZADEH, REZA, MD^{M††}

Provider ID: 100114378012
25982 PALA STE 170
MISSION VIEJO, CA 92691
(949) 581-2002
Farsi, German, Persian
Effective as of 01-JAN-18

BADIE, MEHRNAZ, MD^{F††}

Provider ID: 100113854005
26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
(949) 364-6000
Farsi
Effective as of 01-NOV-12

BENNER, ERIC, MD^{M†}

Provider ID: 100074899004
26800 CROWN VALLEY
PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Spanish
Effective as of 01-NOV-12

CHANG, HELEN, MD^{F††}

Provider ID: 100080383005
25982 PALA STE 250
MISSION VIEJO, CA 92691
(949) 588-0051
Mandarin, Thai
Effective as of 01-JAN-18

COVARRUBIAS, GRACIA, MD^{F††}

Provider ID: 100109548005
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Spanish
Effective as of 01-SEP-18

COVARRUBIAS, GRACIA, MD^{F††}

Provider ID: 100109548011
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Spanish
Effective as of 01-SEP-21

LU, LESLIE, MD^{M†}

Provider ID: 100332363002
26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-SEP-18

MAYET, KHADIJA, MD^{F†}

Provider ID: 100062204006
26800 CROWN VALLEY
PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Gujarati, Urdu
Effective as of 01-FEB-16

NGUYEN, VY, MD^{F††}

Provider ID: 100105037005
26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
(949) 364-6000
Vietnamese
Effective as of 01-NOV-12

NIETO, ELIZABETH, MD^{F†}

Provider ID: 100364838002
26800 CROWN VALLEY
PKWY STE 315

C1. 網絡內提供者清單 初級保健提供者

MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-AUG-22

NIETO, ELIZABETH, MD^{F†}

Provider ID: 100364838004
📍 26800 CROWN VALLEY
PKWY STE 25
MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-OCT-22

NOORIAN, NADER, MD^{M††}

Provider ID: 100052175006
📍 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-NOV-12

PRATT, DONALD, MD^{M††}

Provider ID: 100088649011
📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-AUG-22

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408005
📍 23512 MADERO
MISSION VIEJO, CA 92691
☎ (949) 583-1600
📱 Farsi
Effective as of 01-AUG-20

ROKSHADFAR, SAGHI, MD^{F†}

Provider ID: 100113408006
📍 23512 MADERO
MISSION VIEJO, CA 92691
☎ (949) 583-1600
📱 Farsi
Effective as of 01-MAY-12

SELIGSOHN, BRUCE, MD^{M*}

Provider ID: 100021098007
📍 26302 LA PAZ RD STE 211
MISSION VIEJO, CA 92691
☎ (949) 588-8775
📱 Spanish
Effective as of 01-JAN-18

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248005
📍 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
☎ (949) 364-3532
📱 Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248004
📍 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
☎ (949) 364-3532
📱 Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248007
📍 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
☎ (949) 364-3532
📱 Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248003
📍 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
☎ (949) 364-3532
📱 Russian
Teleservice

Effective as of 01-MAR-23

STALLWORTH, ROXANNE, MD^{F††}

Provider ID: 100185861008
📍 26800 CROWN VALLEY
PKWY STE 315
MISSION VIEJO, CA 92691
☎ (949) 364-6000
📱 Farsi, Spanish
Effective as of 01-AUG-19

STAUNTON, MICHELE, MD^{F††}

Provider ID: 100043245010
📍 26800 CROWN VALLEY
PKWY STE 330
MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-NOV-14

STAUNTON, MICHELE, MD^{F†}

Provider ID: 100043245014
📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
☎ (949) 364-6000
Effective as of 01-AUG-22

SWADENER, NINA, MD^{F†}

Provider ID: 100219528002
📍 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691
☎ (949) 364-6000
📱 Spanish
Effective as of 01-NOV-14

TRUONG, ANDREW, MD^{M†}

Provider ID: 100344383002
📍 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691
☎ (949) 364-6000
📱 Vietnamese
Effective as of 01-JUL-19

C1. 網絡內提供者清單 初級保健提供者

TSAI, MON TA, MD^{M†}

Provider ID: 100060379006

25982 PALA STE 250
MISSION VIEJO, CA 92691

(949) 588-0051

Chinese, Mandarin,
Taiwanese

Effective as of 01-JAN-18

WADELL, CHAD, MD^{M†}

Provider ID: 100108309006

26800 CROWN VALLEY
PKWY STE 315
MISSION VIEJO, CA 92691

(949) 364-6000

Effective as of 01-NOV-14

YAZDI, JANET, MD^{F†}

Provider ID: 100086097007

26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691

(949) 364-6000

Effective as of 01-MAR-13

FAMILY PRACTICE

BREWER, ANH, DO^{F†}

Provider ID: 100260727007

27722 CLINTON KEITH RD
BLDG F

MURRIETA, CA 92562

(951) 878-9820

Vietnamese

Effective as of 01-NOV-20

BREWER, ANH, DO^{F†}

Provider ID: 100260727002

27722 CLINTON KEITH RD
BLDG F

MURRIETA, CA 92562

(951) 878-9820

Vietnamese

Effective as of 01-FEB-16

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323004

25470 MEDICAL CENTER
DR STE 102

MURRIETA, CA 92562

(951) 698-6090

Spanish

Effective as of 01-SEP-10

MCKERAHAN, KELLY, DO^M

Provider ID: 100031842003

25095 JEFFERSON AVE
STE 202

MURRIETA, CA 92562

(951) 696-9566

Effective as of 01-JUN-03

MEHARDA, SANJIWANI, MD^F

Provider ID: 100327486018

24910 LAS BRISAS RD STE
111

MURRIETA, CA 92562

(951) 694-8549

Hindi, Punjabi, Urdu

Effective as of 01-DEC-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585007

41680 IVY ST STE A
MURRIETA, CA 92562

(951) 677-2227

Vietnamese

Effective as of 01-NOV-23

NGUYEN, BACH, MD^{M†}

Provider ID: 100107585005

41680 IVY ST STE A
MURRIETA, CA 92562

(951) 677-2227

Vietnamese

Effective as of 01-OCT-22

PHILLIPS, LILY, MD^{F†}

Provider ID: 100113116007

27910 LAS BRISAS RD

STE 105

MURRIETA, CA 92562

(951) 231-1385

Chinese, Mandarin, Spanish

Effective as of 01-AUG-14

PHILLIPS, LILY, MD^{F†}

Provider ID: 100113116009

27910 LAS BRISAS RD
STE 106

MURRIETA, CA 92562

(951) 231-1385

Chinese, Mandarin, Spanish

Effective as of 01-AUG-14

SOTIS, JAMES, MD^{M†}

Provider ID: 100343557003

38860 SKY CANYON DR
BLDG A

MURRIETA, CA 92563

(951) 676-4193

Effective as of 01-AUG-19

WALTER, ROME, DO^M

Provider ID: 100198386003

41011 CALIFORNIA OAKS
RD STE 103

MURRIETA, CA 92562

(951) 225-6287

Effective as of 01-JUN-19

YUN, JONATHAN, DO^{M†}

Provider ID: 100025475022

24910 LAS BRISAS RD STE
111

MURRIETA, CA 92562

(951) 694-8549

Korean, Spanish

Effective as of 01-AUG-20



YUN, JONATHAN, DO^{M†}

Provider ID: 100025475024




24910 LAS BRISAS RD STE
111

MURRIETA, CA 92562



C1. 網絡內提供者清單 初級保健提供者




 (951) 694-8549
 Korean, Spanish
Effective as of 01-NOV-20



GENERAL PRACTICE

LULIC, DZENAN, MD^{Mt}
Provider ID: 100283060006
 40700 CALIFORNIA OAKS
RD STE 206
MURRIETA, CA 92562
 (951) 412-0011
 Spanish
Effective as of 01-MAR-19

INTERNAL MEDICINE




BLACK, JASON, MD^{Mt}
Provider ID: 100073449005
 24680 JEFFERSON AVE
STE A
MURRIETA, CA 92562
 (951) 677-2252
Effective as of 01-JAN-16




GONZALES, EDIVINA, MD^F
Provider ID: 100039220007
 39755 DATE ST STE 103
MURRIETA, CA 92563
 (951) 304-3221
 Spanish, Tagalog
Effective as of 01-JAN-11




GONZALES, PATRICK, MD^{Mt}
Provider ID: 100109580007
 39755 DATE ST STE 103
MURRIETA, CA 92563
 (951) 304-3221
Effective as of 01-APR-19



GONZALES, PATRICK, MD^{Mt}
Provider ID: 100109580008
 39755 DATE ST STE 103
MURRIETA, CA 92563
 (951) 304-3221

Effective as of 01-APR-19



GONZALES, EDIVINA, MD^F
Provider ID: 100039220008
 39755 DATE ST STE 103
MURRIETA, CA 92563
 (951) 304-3221
 Spanish, Tagalog
Effective as of 01-SEP-10

MARTINEZ, JORGE, MD^{Mt}
Provider ID: 100096235010
 39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
 (951) 461-1331
 Spanish
Effective as of 01-FEB-21



MARTINEZ, JORGE, MD^{Mt}
Provider ID: 100096235003
 39755 MURRIETA HOT
SPRINGS RD STE E120
MURRIETA, CA 92563
 (951) 461-1331
 Spanish
Effective as of 01-DEC-12




REYNOLDS, RICHARD, MD^{Mt}
Provider ID: 100043439030
 25109 JEFFERSON AVE STE
100
MURRIETA, CA 92562
 (951) 698-0440
Effective as of 01-OCT-22



PEDIATRICS




NGUYEN, TUAN, MD^{Mt}
Provider ID: 100105070004
 28078 BAXTER RD STE 320
MURRIETA, CA 92563
 (951) 246-4546
Effective as of 01-APR-21




FAMILY PRACTICE


ALGHAMDI, ASMA, MD^{Ft}
Provider ID: 100359014006
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
Effective as of 01-NOV-21

**ALVAREZ-ESTRADA, MIGUEL,
MD^M**
Provider ID: 100360099026
 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
 (844) 200-2426
 Spanish
Effective as of 01-FEB-24


CAMPBELL, BRIANNA, MD^{Ft}
Provider ID: 100360159004
 2400 E 8TH ST
NATIONAL CITY, CA 91950
 (619) 662-4100
Effective as of 01-JAN-21

CARLSON, ROBERT, MD^{Mt}
Provider ID: 100002398003
 36 N EUCLID AVE STE 105
NATIONAL CITY, CA 91950
 (619) 255-2950
 Spanish, Tagalog
Effective as of 01-SEP-22

CEVALLOS, JAMES, MD^{Mt}
Provider ID: 100079582004
 1136 D AVE
NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
Effective as of 01-MAR-16

CEVALLOS, JAMES, MD^{Mt}
Provider ID: 100079582009
 1136 D AVE
NATIONAL CITY, CA 91950

C1. 網絡內提供者清單 初級保健提供者


 (619) 662-4100

 Spanish


Effective as of 01-APR-23

DILLON, MAYRA, MD^{F†}

Provider ID: 100163378003

 1136 D AVE

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-JAN-14

KAKAIYA, ROSHNI, DO^F

Provider ID: 100395889005

 2835 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (844) 200-2426

 Spanish


Effective as of 01-FEB-24

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070023

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (619) 434-7308

 Arabic, Armenian, Spanish

Teleservice


Effective as of 01-NOV-21


MATTHEWS, MERRITT, MD^{M†}

Provider ID: 100021162012

 610 EUCLID AVE STE 302

NATIONAL CITY, CA 91950

 (619) 527-7700

 Spanish, Tagalog


Effective as of 01-NOV-20

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216017

 331 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216018

 332 E 8TH ST

NATIONAL CITY, CA 91950


 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216020

 334 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216021

 335 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216022

 336 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216023

 337 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216024

 338 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216025

 339 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216026

 340 E 8TH ST STE 330

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-MAY-23

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216016

 330 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216019

 333 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216002

 330 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish

Effective as of 01-FEB-18

NAVARRO, VANESSA, MD^{F†}

Provider ID: 100173914003

C1. 網絡內提供者清單 初級保健提供者

2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Filipino, Spanish, Tagalog
Effective as of 01-JAN-14

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053019
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Spanish
Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053014
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Spanish
Effective as of 01-SEP-20

OCEGUEDA, JOSHUA, MD^{M†}

Provider ID: 100377020002
1136 D AVE
NATIONAL CITY, CA 91950
(619) 662-4100
Effective as of 01-SEP-21

ORTIZ ILIZALITURRI, ANA, MD^{F*}

Provider ID: 100394347012
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Spanish
Teleservice
Effective as of 01-OCT-23

PATEL, PAAVAN, DO^M

Provider ID: 100413256010
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Effective as of 01-DEC-23

PATEL, PAAVAN, DO^M

Provider ID: 100413256006
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Effective as of 01-NOV-23

ROBERTS, POMAI, MD^{F††}

Provider ID: 100323487002
1136 D AVE
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish
Effective as of 01-SEP-17

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888015
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Teleservice
Effective as of 01-JUL-21

SNOOK, BRIAN, DO^{M††}

Provider ID: 100211994002
2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish
Effective as of 01-JUN-14

SNOOK, BRIAN, DO^{M††}

Provider ID: 100211994006
2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish
Effective as of 01-JAN-21

SNOOK, BRIAN, DO^{M††}

Provider ID: 100211994008
2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-MAR-24

STONES, RACHEL, MD^F

Provider ID: 100387928006
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Teleservice
Effective as of 01-MAY-22

VELASQUEZ, SHARON, MD^{F††}

Provider ID: 100189428004
2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish
Effective as of 01-JAN-14

VELASQUEZ, SHARON, MD^{F††}

Provider ID: 100189428010
2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish
Effective as of 01-NOV-23

FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,

Provider ID: PG0085737003
1000 EUCLID AVE
NATIONAL CITY, CA 91950
(619) 515-2399
Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396004
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Effective as of 01-JAN-21

OPERATION SAMAHAN -

C1. 網絡內提供者清單 初級保健提供者

NATIONAL C, †

Provider ID: PG0084147004

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

(844) 200-2426

Effective as of 01-JAN-21

OPERATION SAMAHAN

GRANGER SCHOOL BASED,

Provider ID: PG0084288003

2101 GRANGER AVE
NATIONAL CITY, CA 91950

(844) 200-2426

Effective as of 01-JAN-21

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: PG0047542010

1136 D AVE
NATIONAL CITY, CA 91950

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH

PARADISE HILLS, †

Provider ID: PG0047542011

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: PG0077626003

330 E 8TH ST
NATIONAL CITY, CA 91950

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

GENERAL PRACTICE

MEDINA, NATALIE, MD^F

Provider ID: 100254911004

502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950

(619) 267-1168

Spanish

Effective as of 01-MAR-18

MEDINA, NATALIE, MD^F

Provider ID: 100254911015

502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950

(619) 267-1168

Spanish

Effective as of 01-MAR-21

MEDINA, NATALIE, MD^F

Provider ID: 100254911014

502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950

(619) 267-1168

Spanish

Effective as of 01-JAN-21

INTERNAL MEDICINE

BRAVERMAN, IRA, MD^{Mt}

Provider ID: 100012010018

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

(619) 267-8181

Spanish, Tagalog

Effective as of 01-AUG-20

BRAVERMAN, IRA, MD^{Mt}

Provider ID: 100012010021

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

(619) 267-8181

Spanish, Tagalog

Effective as of 01-APR-21

BRAVERMAN, IRA, MD^{Mt}

Provider ID: 100012010020

610 EUCLID AVE STE 201

NATIONAL CITY, CA 91950

(619) 267-8181

Spanish, Tagalog

Effective as of 01-NOV-20

CANTU-REYNA, GUILLERMO, MD^{Mt}

Provider ID: 100214575010

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

(619) 434-7308

Teleservice

Effective as of 01-JUL-21

COMUNALE, RODERICK, MD^{Mt}

Provider ID: 100063923026

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

(858) 551-0276

Spanish

Teleservice

Effective as of 01-NOV-23

DELA PAZ, LENNIE, MD^{Mt}

Provider ID: 100007688007

610 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

(619) 475-3600

Spanish, Tagalog

Effective as of 01-JAN-21

EL GHONEIMY, AHMED, MD^{Mt}

Provider ID: 100103500014

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

(619) 434-7308

Arabic

Teleservice

Effective as of 01-AUG-22


HEKMAT, RAZI, MD^{Mt}

Provider ID: 100081732022



610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

C1. 網絡內提供者清單



初級保健提供者

 (619) 267-8181
Effective as of 01-APR-21



HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732019
 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 (619) 267-8181
Effective as of 01-AUG-20




HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732021
 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 (619) 267-8181
Effective as of 01-NOV-20




KURUVADI, NISHA, DO^{F*}

Provider ID: 100412012005
 502 EUCLID AVE STE 203
NATIONAL CITY, CA 91950
 (619) 267-0553
Effective as of 01-OCT-23



MEDINA, NATALIE, MD^F


Provider ID: 100254911013
 502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
 (619) 267-1168
 Spanish
Effective as of 01-JAN-21

PRATHIPATI, LAKSHMI, MD^{F†}




Provider ID: 100041945033
 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
 (619) 267-0553
 Spanish, Tagalog, Telugu
Effective as of 01-AUG-22

PRATHIPATI, LAKSHMI, MD^{F†}




Provider ID: 100041945034
 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
 (619) 267-0553

 Spanish, Tagalog, Telugu
Effective as of 01-SEP-22




TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246017
 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-SEP-20




TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246019
 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-NOV-20




TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246016
 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-21

TIANGCO, IRINEO, MD^{M†}



Provider ID: 100107246005
 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-14

TIANGCO, IRINEO, MD^{M†}



Provider ID: 100107246018
 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
 (619) 479-0320
 Spanish, Tagalog
Effective as of 01-JAN-21

FAMILY PRACTICE



GREENBERG, CATOU, MD^{F*}

Provider ID: 100072487003
 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
 (949) 718-9020
Effective as of 01-JUL-12




GREENBERG, CATOU, MD^{F*}

Provider ID: 100072487006
 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
 (949) 718-9020
Effective as of 01-JAN-14




GREENBERG, CATOU, MD^{F*}

Provider ID: 100072487007
 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
 (949) 718-9020
Effective as of 01-SEP-22

KIM, KAREN, DO^F

Provider ID: 100070645006
 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
 (949) 718-9020
 Korean
Effective as of 01-JAN-14

KIM, KAREN, DO^F

Provider ID: 100070645007
 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660
 (949) 718-9020
 Korean

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-SEP-22

KIM, KAREN, DO^{F*}

Provider ID: 100070645003

📍 1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

☎ (949) 718-9020

🗳 Korean

Effective as of 01-JUL-12

MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397012

📍 400 NEWPORT CENTER
DR STE 303
NEWPORT BEACH, CA
92660

☎ (949) 644-1300

🗳 Spanish

Effective as of 01-APR-22

MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397011

📍 400 NEWPORT CENTER
DR STE 303
NEWPORT BEACH, CA
92660

☎ (949) 644-1300

🗳 Spanish

Effective as of 01-APR-22

INTERNAL MEDICINE

SPRINGSTUBB, ADITI, MD^{F†}

Provider ID: 100201144014

📍 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660

☎ (949) 557-0830

🗳 Hindi, Spanish

Effective as of 01-OCT-21

SYED, SAMEENA, DO^F

Provider ID: 100380768002

📍 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660

☎ (949) 557-0830

Effective as of 01-DEC-21

FAMILY PRACTICE

BANIADAM, BEHZAD, MD^M

Provider ID: 100069979008

📍 3231 WARING CT STE L
OCEANSIDE, CA 92056

☎ (760) 630-6300

🗳 Spanish

Effective as of 01-MAR-21

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875026

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ (844) 308-5003

🗳 Spanish

Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875027

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ (844) 308-5003

🗳 Spanish

Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}

Provider ID: 100049875025

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ (844) 308-5003

🗳 Spanish

Effective as of 01-JAN-24

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800018

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ (760) 631-5000

🗳 Spanish

Effective as of 01-JAN-24

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800016

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ (760) 631-5000

🗳 Spanish

Effective as of 01-JAN-24

ESPINOSA-SILVA, YAMINAH, DO^{F*}

Provider ID: 100358800017

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ (760) 631-5000

🗳 Spanish

Effective as of 01-JAN-24

GONZALES, MICHELLE, MD^F

Provider ID: 100063095006

📍 3601 VISTA WAY
OCEANSIDE, CA 92056

☎ (760) 639-1204

🗳 Spanish

Effective as of 01-SEP-21

KURUKULASURIYA, DAYANTHITHI, DO^F

Provider ID: 100326148005

📍 605 CROUCH ST
OCEANSIDE, CA 92054

☎ (760) 736-6767

Effective as of 01-FEB-23

MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984037




📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ (760) 631-5000




C1. 網絡內提供者清單 初級保健提供者

 Spanish
Effective as of 01-JAN-24



MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984038
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
Effective as of 01-JAN-24



MARTINEZ, LESLY, MD^{F*}

Provider ID: 100397984036
 517 N HORNE ST
OCEANSIDE, CA 92054
 (766) 315-0000
 Spanish
Effective as of 01-JAN-24




PONSFORD, DIANA, DO^F

Provider ID: 100350934010
 517 N HORNE ST
OCEANSIDE, CA 92054
 (760) 631-5000
Effective as of 01-MAY-22


PONSFORD, DIANA, DO^F



Provider ID: 100350934011
 517 N HORNE ST
OCEANSIDE, CA 92054
 (760) 631-5000
Effective as of 01-JAN-24

SAFI, ROOZCHEHR, MD^{F†}




Provider ID: 100201387012
 605 CROUCH ST
OCEANSIDE, CA 92054
 (760) 736-6767
 Farsi
Effective as of 01-APR-14

VIDAL, MONICA, DO^{F††}




Provider ID: 100327876043
 517 N HORNE ST
OCEANSIDE, CA 92054

 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F††}



Provider ID: 100327876042
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 (844) 308-5003
 Spanish
Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F††}



Provider ID: 100327876044
 4700 N RIVER RD
OCEANSIDE, CA 92057
 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

FQHC



TRUECARE,

Provider ID: PG0092588008
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 (760) 757-5841
Teleservice
Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC, †



Provider ID: PG0072409007
 4700 N RIVER RD
OCEANSIDE, CA 92057
 (760) 631-5000
Teleservice
Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: PG0084639007
 517 N HORNE ST
OCEANSIDE, CA 92054
 (760) 631-5000
Teleservice




Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC PIER VIEW WAY,



Provider ID: PG0084683007
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 (760) 631-5000
Teleservice
Effective as of 01-JUL-22

INTERNAL MEDICINE



CHONG, ILSONG, MD^M

Provider ID: 100334344006
 605 CROUCH ST
OCEANSIDE, CA 92054
 (760) 736-6767
 Korean
Effective as of 01-FEB-23



CURRAN, PERRIN, MD^M

Provider ID: 100083095002
 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056
 (760) 945-1894
Effective as of 01-FEB-05


HEIFETZ, SUSAN, MD^F

Provider ID: 100024397011
 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056
 (760) 529-9514
Effective as of 01-SEP-21

LAWSON, CATHERINE, MD^F

Provider ID: 100080716004
 3230 WARING CT STE J
OCEANSIDE, CA 92056
 (760) 941-4498
Effective as of 01-DEC-10

LIZOTTE, PAUL, DO^{M†}

Provider ID: 100212648008
 115 N EL CAMINO REAL STE

C1. 網絡內提供者清單 初級保健提供者

A
OCEANSIDE, CA 92058
☎ (760) 330-5055
🗨 Spanish
Effective as of 01-MAR-21

MACMURRAY, MICHAEL, MD^M
Provider ID: 100067535007
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ (760) 631-5000
🗨 Spanish
Effective as of 01-MAR-20

MACMURRAY, MICHAEL, MD^M
Provider ID: 100067535003
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ (760) 631-5000
🗨 Spanish
Effective as of 01-OCT-05

MACMURRAY, MICHAEL, MD^M
Provider ID: 100067535012
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ (760) 631-5000
🗨 Spanish
Effective as of 01-JAN-24

SAMANI, PARGOL, MD^F
Provider ID: 100325205012
📍 3927 WARING RD STE C
OCEANSIDE, CA 92056
☎ (619) 703-7220
🗨 Farsi, Persian
Teleservice
Effective as of 01-DEC-23

ZIMMERMANN, ANDRES, MD^M
Provider ID: 100015622004
📍 3601 VISTA WAY STE 201
OCEANSIDE, CA 92056
☎ (760) 639-1714
🗨 Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F
Provider ID: 100320650015
📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
☎ (760) 742-9919
🗨 Spanish
Effective as of 01-FEB-24

FQHC

**NEIGHBORHOOD
HEALTHCARE PAUMA
VALLEY,**
Provider ID: PG0024990047
📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
☎ (760) 742-9919
Teleservice
Effective as of 01-JUL-22

GENERAL PRACTICE

LAFONTANT, JEAN, MD^{M†}
Provider ID: 100218405011
📍 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
🗨 French, Spanish
Effective as of 01-APR-21

INTERNAL MEDICINE

SANUCCI, SHAUN, DO^F
Provider ID: 100352649064
📍 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
Effective as of 01-FEB-24

SANUCCI, SHAUN, DO^F
Provider ID: 100352649063

📍 524 W 4TH ST STE B
PERRIS, CA 92570
☎ (951) 355-0030
Effective as of 01-NOV-23

FAMILY PRACTICE

KAUR, JATINDER, MD^F
Provider ID: 100315025014
📍 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
🗨 Hindi, Urdu
Effective as of 01-JAN-24

KAUR, JATINDER, MD^F
Provider ID: 100315025013
📍 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
🗨 Hindi, Urdu
Effective as of 01-MAY-23

TANKSLEY, SIMON, MD^M
Provider ID: 100353447004
📍 15611 POMERADO RD FL 3
POWAY, CA 92064
☎ (858) 675-3210
🗨 Spanish
Effective as of 01-JAN-24

FQHC

**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**
Provider ID: PG0092632004
📍 13010 POWAY RD
POWAY, CA 92064
☎ (858) 218-3000
Effective as of 01-JUL-22

INTERNAL MEDICINE

CAPARSO, AMANDA, DO^{F††}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100202026020

13010 POWAY RD
POWAY, CA 92064

(760) 737-6935

Effective as of 01-OCT-22

RIVERA, MARCELO, MD^M

Provider ID: 100036662021

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662020

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662019

13525 MIDLAND RD STE F
POWAY, CA 92064

(858) 486-9100

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662015

13525 MIDLAND RD STE F
POWAY, CA 92064

(858) 486-9100

Spanish, Tagalog

Effective as of 01-JAN-21

RIVERA, MARCELO, MD^M

Provider ID: 100036662022

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-DEC-23

WINE, DAVID, MD^M

Provider ID: 100035139012

15611 POMERADO RD STE
400
POWAY, CA 92064

(858) 675-3100

Effective as of 01-FEB-24

FQHC

TRUECARE, †

Provider ID: PG0025086043

220 ROTANZI ST
RAMONA, CA 92065

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

YUNG, DORIS, MD^{F†}

Provider ID: 100036513005

220 ROTANZI ST
RAMONA, CA 92065

(760) 736-6767

Chinese, Mandarin, Spanish

Effective as of 01-DEC-18

FAMILY PRACTICE

BILAN, NATALIA, MD^F

Provider ID: 100112756005

29809 SANTA MARGARITA
PKWY STE 300
RANCHO SANTA
MARGARITA, CA 92688

(949) 709-5100

Russian

Effective as of 01-JAN-18

CIANCIOLA, MARK, MD^{M††}

Provider ID: 100057057005

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-MAY-12

GHAZI, FARANAK, MD^{F†}

Provider ID: 100332514003

29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

(949) 709-0988

Effective as of 01-AUG-18

KARIMABADI, MARJAN, MD^{F††}

Provider ID: 100196435002

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

(949) 459-9968

Farsi

Effective as of 01-OCT-13

GENERAL PRACTICE

RAMIREZ, HECTOR, MD^M

Provider ID: 100077601004

29833 SANTA MARGARITA
PKWY STE 200
RANCHO SANTA
MARGARITA, CA 92688

(949) 858-8652

Spanish

Effective as of 01-JAN-18

INTERNAL MEDICINE

GORE, GWENDOLYN, MD^{F††}

Provider ID: 100020754005

29472 AVENIDA DE LAS
BANDERA

C1. 網絡內提供者清單 初級保健提供者

RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968
Effective as of 01-MAY-12

KAMAREI, SHAPARAK, MD^{Ft}

Provider ID: 100132319012
☎ 29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 709-0988
☐ Farsi
Effective as of 01-JAN-18

TRAN, LILIAN, MD^{Ft}

Provider ID: 100105534008
☎ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
☎ (949) 459-9968
☐ Vietnamese
Effective as of 01-MAR-15

FAMILY PRACTICE

DESILVA, PETER, MD^M

Provider ID: 100046594003
☎ 29809 SANTA MARGARITA
PKWY STE 300
RCHO STA MARG, CA
92688
☎ (949) 709-5100
Effective as of 01-JAN-18

ALI, MOHAMMED, MD^{Mt}

Provider ID: 100114282052
☎ 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
☐ Hindi, Telugu, Urdu
Effective as of 01-DEC-18

ALI, MOHAMMED, MD^{Mt}

Provider ID: 100114282063
☎ 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-22

ALI, MOHAMMED, MD^{Mt}

Provider ID: 100114282028
☎ 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-17

ALI, MOHAMMED, MD^{Mt}

Provider ID: 100114282021
☎ 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
☐ Hindi, Telugu, Urdu
Effective as of 01-JAN-16

ALI, MOHAMMED, MD^{Mt}

Provider ID: 100114282008
☎ 665 CAMINO DE LOS
MARES STE 203
SAN CLEMENTE, CA 92673
☎ (949) 493-9344
☐ Hindi, Telugu, Urdu
Effective as of 01-OCT-15

DAVALOS, RICARDO, MD^M

Provider ID: 100077642004
☎ 150 AVENIDA CABRILLO
STE A
SAN CLEMENTE, CA 92672
☎ (949) 369-6993
☐ Spanish
Effective as of 01-JAN-18

RAMSEY, KAYLA, DO^F

Provider ID: 100365540002
☎ 1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673
☎ (949) 557-0820
Effective as of 01-JAN-21

ROBERSON, ANDREA, DO^{Ft}

Provider ID: 100091717003
☎ 105 AVENIDA DE LA
ESTRELLA STE 1A
SAN CLEMENTE, CA 92672
☎ (949) 586-8000
Effective as of 01-JAN-18

SAFAVI, MAHSA, MD^{Ft}

Provider ID: 100350049007
☎ 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
☎ (949) 493-6113
☐ Farsi, Persian
Effective as of 01-JAN-23

SHOKOUHI, SARA, MD^{Ft}

Provider ID: 100111432006
☎ 665 CAMINO DE LOS
MARES STE 207
SAN CLEMENTE, CA 92673
☎ (949) 661-4411
☐ Farsi, Persian
Effective as of 01-JAN-18

YU, CHRISTINE, DO^F




Provider ID: 100420091002
☎ 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
☎ (949) 542-8865
☐ Chinese, Mandarin
Effective as of 01-DEC-23

INTERNAL MEDICINE

CHANG, LAWRENCE, MD^M



Provider ID: 100045275002

C1. 網絡內提供者清單 初級保健提供者

 665 CAMINO LOS MARES
301
SAN CLEMENTE, CA 92673
 (949) 240-9664
 Chinese, Mandarin, Spanish
Effective as of 01-JAN-18



GARNER, KAREN, MD^{F†}

Provider ID: 100100519023

 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-NOV-17



MITREVSKI, PREDRAG, MD^{M†}

Provider ID: 100071204007

 675 CAMINO DE LOS
MARES STE 200
SAN CLEMENTE, CA 92673
 (949) 542-8865
Effective as of 01-JAN-15



ONYEKWULUJE, ANNE, MD^F

Provider ID: 100176684006

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
 (949) 542-8865
Effective as of 01-APR-24



REXINGER, KENNETH, MD^{M†}

Provider ID: 100058286009

 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-JAN-15



UNDERWOOD JOLLY, AMY, MD^{F†}

Provider ID: 100086849011

 831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
 (949) 364-5600
Effective as of 01-JAN-22

WOOD, YELENA, MD^{F†}




Provider ID: 100018427006

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
 (949) 493-6113
Effective as of 01-JAN-18

FAMILY PRACTICE




ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099016

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100
 Spanish
Effective as of 01-MAY-22


ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099012

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




BAIK, JESSICA, MD^F

Provider ID: 100427411002

 7825 ENGINEER RD STE 101
SAN DIEGO, CA 92111
 (858) 277-7111
Teleservice
Effective as of 01-APR-24




BOYD, JAMES, MD^M

Provider ID: 100053030010

 9333 GENESEE AVE STE
250
SAN DIEGO, CA 92121
 (619) 810-7027
 Spanish
Teleservice
Effective as of 01-DEC-23




CUTLER, MICHAEL, MD^M

Provider ID: 100225708017

 8996 MIRAMAR RD STE
308
SAN DIEGO, CA 92126
 (858) 335-2670
 Russian, Spanish
Effective as of 01-OCT-23




CUTLER, MICHAEL, MD^M

Provider ID: 100225708023

 3802 NATIONAL AVE
SAN DIEGO, CA 92113
 (619) 264-2591
 Russian, Spanish
Effective as of 01-APR-24




CUTLER, MICHAEL, MD^M

Provider ID: 100225708019

 3802 NATIONAL AVE
SAN DIEGO, CA 92113
 (619) 264-2591
 Russian, Spanish
Effective as of 01-DEC-23




CUTLER, MICHAEL, MD^M

Provider ID: 100225708021

 3802 NATIONAL AVE
SAN DIEGO, CA 92113
 (619) 264-2591
 Russian, Spanish
Effective as of 01-JAN-24


DABO, TARAM, MD^{M†}

Provider ID: 100075261003

 1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109
 (858) 270-5454
 Chinese, French, Mandarin
Effective as of 01-MAR-11



DABO, TARAM, MD^{M†}

Provider ID: 100075261004

 1919 GRAND AVE STE 1E
SAN DIEGO, CA 92109

C1. 網絡內提供者清單


初級保健提供者

 (858) 270-5454
 Chinese, French, Mandarin
 Effective as of 01-JAN-14

DAO, VIET, MD^{M†}

Provider ID: 100105020023

 2363 ULRIC ST STE B
 SAN DIEGO, CA 92111

 (858) 268-1747


 Mandarin, Spanish,
 Vietnamese

Effective as of 01-MAY-14

DAO, VIET, MD^{M†}

Provider ID: 100105020062

 2363 ULRIC ST STE B
 SAN DIEGO, CA 92111

 (858) 268-1747


 Mandarin, Spanish,
 Vietnamese


Effective as of 01-AUG-20

DAO, VIET, MD^{M†}

Provider ID: 100105020027

 2363 ULRIC ST STE B
 SAN DIEGO, CA 92111

 (858) 268-1747


 Mandarin, Spanish,
 Vietnamese

Effective as of 01-APR-15

DAO, VIET, MD^{M†}

Provider ID: 100105020066

 2363 ULRIC ST STE B
 SAN DIEGO, CA 92111

 (858) 268-1747


 Mandarin, Spanish,
 Vietnamese


Effective as of 01-JAN-21

DAO, VIET, MD^{M†}

Provider ID: 100105020064

 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115


 (619) 583-0553

 Mandarin, Spanish,
 Vietnamese
 Effective as of 01-AUG-20

DAO, VIET, MD^{M†}

Provider ID: 100105020068

 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115

 (619) 583-0553


 Mandarin, Spanish,
 Vietnamese

Effective as of 01-JAN-21

DAO, VIET, MD^{M†}

Provider ID: 100105020067

 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115

 (619) 583-0553


 Mandarin, Spanish,
 Vietnamese


Effective as of 01-JAN-21

DAO, VIET, MD^{M†}

Provider ID: 100105020035

 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115

 (619) 583-0553


 Mandarin, Spanish,
 Vietnamese

Effective as of 01-OCT-17

DAO, VIET, MD^{M†}

Provider ID: 100105020069

 4616 EL CAJON BLVD STE 9
 SAN DIEGO, CA 92115

 (619) 583-0553


 Mandarin, Spanish,
 Vietnamese


Effective as of 01-NOV-20

DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869002

 950 S EUCLID AVE
 SAN DIEGO, CA 92114


 (619) 662-4100


 Spanish
 Teleservice
 Effective as of 01-AUG-21

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222005

 3750 CONVOY ST STE 118
 SAN DIEGO, CA 92111


 (760) 741-1224

 French, Hungarian, Spanish
 Effective as of 01-AUG-23

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725002

 3969 4TH AVE STE 203
 SAN DIEGO, CA 92103

 (619) 294-6500


Teleservice

Effective as of 01-DEC-20

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725005

 3969 4TH AVE STE 203
 SAN DIEGO, CA 92103

 (619) 294-6500


Teleservice

Effective as of 01-JAN-21

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725007

 3969 4TH AVE STE 203
 SAN DIEGO, CA 92103

 (619) 294-6500


Teleservice


Effective as of 01-NOV-21

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408003

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105

 (619) 255-9155

 French
 Teleservice


Effective as of 01-APR-24

C1. 網絡內提供者清單 初級保健提供者

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408004

 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 269-1269

 French


Teleservice


Effective as of 01-APR-24

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529011

 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

 (858) 277-5463

 Vietnamese


Teleservice

Effective as of 01-JUN-22

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529013

 4551 EL CAJON BLVD
SAN DIEGO, CA 92115

 (619) 280-7185

 Vietnamese

Teleservice


Effective as of 01-OCT-22

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753005

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

 (858) 529-7229

Teleservice


Effective as of 01-NOV-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753009

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

 (858) 529-7229

Teleservice


Effective as of 01-MAR-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753002

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

 (858) 529-7229

Teleservice


Effective as of 01-AUG-22

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753010

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

 (858) 529-7229

Teleservice


Effective as of 01-SEP-23

DRZYMALSKI, MONIKA, DO^F

Provider ID: 100390753004

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

 (858) 529-7229

Teleservice


Effective as of 01-OCT-22

DUDAREWICZ, TERESA, MD^{F†}

Provider ID: 100068264017

 9909 MIRA MESA BLVD
STE 110

SAN DIEGO, CA 92131

 (858) 788-7208

 French, Polish, Russian

Teleservice


Effective as of 01-OCT-22

DUDAREWICZ, TERESA, MD^{F†}

Provider ID: 100068264013

 9909 MIRA MESA BLVD
STE 110

SAN DIEGO, CA 92131

 (858) 788-7208

 French, Polish, Russian

Teleservice


Effective as of 01-NOV-23

DUDAREWICZ, TERESA, MD^{F†}

Provider ID: 100068264016

 9909 MIRA MESA BLVD
STE 110

SAN DIEGO, CA 92131

 (858) 788-7208

 French, Polish, Russian


Teleservice

Effective as of 01-OCT-22

FAMBRO, CYNTHIA, MD^{F†}

Provider ID: 100350838004

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 (619) 662-4100


 Spanish

Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547025

 909 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547010

 903 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121


 Spanish

Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547011

 903 CARDIFF ST
SAN DIEGO, CA 92114

 (619) 465-3121

 Spanish

Effective as of 01-JAN-18

C1. 網絡內提供者清單 初級保健提供者

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547026

📍 903 CARDIFF ST
SAN DIEGO, CA 92114
☎ (619) 465-3121
📱 Spanish
Effective as of 01-NOV-20

GUTIERREZ, LORAIN, MD^{F†}

Provider ID: 100334279007

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ (619) 255-9155
Teleservice
Effective as of 01-AUG-21

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351017

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394
📱 Faroese, Farsi, French
Effective as of 01-APR-23

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351013

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394
📱 Faroese, Farsi, French
Effective as of 01-AUG-20

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351005

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394
📱 Faroese, Farsi, French
Effective as of 01-APR-18

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351016

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394

📱 Faroese, Farsi, French
Effective as of 01-FEB-22

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351015

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
☎ (858) 565-6394
📱 Faroese, Farsi, French
Effective as of 01-JAN-21

HEIMLER, GRAHAM, MD^M

Provider ID: 100395560005

📍 9333 GENESEE AVE
SAN DIEGO, CA 92121
☎ (800) 926-8273
Effective as of 01-JUL-23

HEINRICI, ALEKA, MD^F

Provider ID: 100244401008

📍 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
☎ (619) 662-4100
📱 Spanish
Teleservice
Effective as of 01-APR-23

HENRY, REBECCA, MD^F

Provider ID: 100418054006

📍 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
☎ (858) 554-1212
Effective as of 01-APR-24

HENRY, REBECCA, MD^F

Provider ID: 100418054002

📍 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
☎ (858) 554-1212
Effective as of 01-NOV-23

HOUGHTON, ROBERT, MD^{M†}

Provider ID: 100034977002

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
☎ (619) 233-4044
📱 German, Spanish
Effective as of 01-FEB-07

JENKIN, FREDERICK, DO^{M†}

Provider ID: 100038612009

📍 3562 GOVERNOR DR STE 1
SAN DIEGO, CA 92122
☎ (858) 774-5157
Effective as of 01-MAY-21

JOHN, TANNER, MD^M

Provider ID: 100415495003

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
Teleservice
Effective as of 01-OCT-23

KAUFHOLD, ANNE, MD^{F†}

Provider ID: 100086435019

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Arabic, Spanish
Effective as of 01-JAN-21

KIDDER, BRENDAN, MD^{M†}

Provider ID: 100334556005

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ (619) 662-4100
📱 Spanish
Effective as of 01-MAY-22

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070025

📍 1032 BROADWAY
SAN DIEGO, CA 92101
☎ (619) 795-5991
📱 Arabic, Armenian, Spanish
Teleservice
Effective as of 01-NOV-21

C1. 網絡內提供者清單 初級保健提供者

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070020

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Arabic, Armenian, Spanish
Teleservice

Effective as of 01-NOV-21

KUNIN-RIDA, TERI, MD^{F†}

Provider ID: 100064070026

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 269-1269

Arabic, Armenian, Spanish
Teleservice

Effective as of 01-NOV-21

LEBANO, RICHARD, MD^M

Provider ID: 100340129005

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

(844) 200-2426

Spanish

Effective as of 01-OCT-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354002

2185 GARNET AVE
SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-DEC-03

LIU, CHIA-LIN, DO^M

Provider ID: 100102354004

2185 GARNET AVE
SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-APR-23

LUAN, GORDON, MD^{M†}

Provider ID: 100012685016

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-JUN-22

LUAN, GORDON, MD^{M†}

Provider ID: 100012685018

4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-NOV-23

MARQUEZ, LUIS, MD^{M†}

Provider ID: 100078829006

4060 4TH AVE STE 540
SAN DIEGO, CA 92103

(619) 236-8796

Italian, Spanish

Effective as of 01-NOV-21

MATSON, GARY, DO^{M†}

Provider ID: 100051901002

4501 MISSION BAY DR STE
3E

SAN DIEGO, CA 92109

(858) 270-4343

French, Spanish

Effective as of 01-FEB-07

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447004

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 269-1269

Teleservice

Effective as of 01-APR-24

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447003

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

(619) 255-9155

Teleservice

Effective as of 01-APR-24

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732006

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Effective as of 01-MAY-22

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732003

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{F†}

Provider ID: 100073181012

3575 EUCLID AVE STE 100
SAN DIEGO, CA 92105

(619) 284-1400

Chinese, Spanish, Tagalog

Effective as of 01-JAN-21

NGUYEN, HUONG, MD^{F†}

Provider ID: 100104992018

4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115

(619) 285-1522

Cambodian, Cantonese,
Mandarin

Effective as of 01-OCT-23

NGUYEN, HUONG, MD^{F††}

Provider ID: 100104992004

4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115

(619) 285-1522

Cambodian, Cantonese,
Mandarin

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-JAN-14

NGUYEN, LINHKIEU, MD^{F†}

Provider ID: 100073181014

📍 6905 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ (619) 284-1400

📱 Chinese, Spanish, Tagalog

Effective as of 01-FEB-22

ORTIZ ILIZALITURRI, ANA, MD

^{F*}

Provider ID: 100394347011

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 280-4213

📱 Spanish

Teleservice

Effective as of 01-OCT-23

RECALDE, FRANCISCO, MD^{M†}

Provider ID: 100015266018

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

☎ (619) 284-5622

📱 Spanish

Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{M†}

Provider ID: 100015266003

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

☎ (619) 284-5622

📱 Spanish

Effective as of 01-SEP-09

RITTER, STEVEN, DO^{M†}

Provider ID: 100332302002

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

☎ (619) 662-4100

Effective as of 01-AUG-18

RODRIGUEZ, SEAN, MD^M

Provider ID: 100197884009

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 Spanish

Effective as of 01-MAR-21

SALEH, ANDREW, MD^{M†}

Provider ID: 100293587004

📍 1370 ROSECRANS ST STE A
SAN DIEGO, CA 92106

☎ (619) 223-2668

📱 Arabic, Spanish

Effective as of 01-DEC-23

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888011

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 255-9155

Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888013

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 269-1269

Teleservice

Effective as of 01-JUL-21

SCOTT, LAGINA, MD^F

Provider ID: 100363586003

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

☎ (619) 662-4100

Teleservice

Effective as of 01-MAR-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296015

📍 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

☎ (619) 639-7285

📱 Faroese, Farsi, Spanish

Effective as of 01-APR-18

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296021

📍 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

☎ (619) 639-7285

📱 Faroese, Farsi, Spanish

Effective as of 01-JAN-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296022

📍 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

☎ (619) 639-7285

📱 Faroese, Farsi, Spanish

Effective as of 01-SEP-21

SHAMANI, AZAM, MD^{F†}

Provider ID: 100132296023

📍 5555 RESERVOIR DR STE
312

SAN DIEGO, CA 92120

☎ (619) 639-7285

📱 Faroese, Farsi, Spanish

Effective as of 01-SEP-22

SINGER, JACOB, MD^M

Provider ID: 100340992007

📍 4320 GENESEE AVE
SAN DIEGO, CA 92117

☎ (858) 598-6789

Effective as of 01-OCT-23

SINGER, JACOB, MD^M

Provider ID: 100340992008

📍 4320 GENESEE AVE
SAN DIEGO, CA 92117



☎ (858) 598-6789




Effective as of 01-DEC-23



SIVA, TENAYA, MD^M



Provider ID: 100418703003




C1. 網絡內提供者清單 初級保健提供者

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 (619) 662-4100
Teleservice
Effective as of 01-NOV-23



SNYDER, CHRISTOPHER, DO^{Mt}
Provider ID: 100024789053
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-MAR-22



STONES, RACHEL, MD^F
Provider ID: 100387928007
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 255-9155
Teleservice
Effective as of 01-MAY-22




STONES, RACHEL, MD^F
Provider ID: 100387928008
 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 269-1269
Teleservice
Effective as of 01-MAY-22




SZMIDT, MARIA, MD^F
Provider ID: 100108398011
 12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130
 (858) 259-5655
 Polish, Russian, Spanish
Effective as of 01-JAN-21




SZMIDT, MARIA, MD^F
Provider ID: 100108398007
 12395 EL CAMINO REAL
STE 100



SAN DIEGO, CA 92130
 (858) 259-5655
 Polish, Russian, Spanish
Effective as of 01-SEP-15


TEGUH, COLLIN, DO^{Mt}
Provider ID: 100089123007
 2045 ADAMS AVE
SAN DIEGO, CA 92116
 (619) 281-8988
 German, Indonesian,
Malayalam
Teleservice
Effective as of 01-AUG-20




**VAZQUEZ-BOJORQUEZ,
ALEJANDRA, MD^F**
Provider ID: 100391945010
 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
 (858) 554-1212
 Spanish
Effective as of 01-NOV-22



VILLA, MARIA, MD^{Ft}
Provider ID: 100111602017
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21



VILLA, MARIA, MD^{Ft}
Provider ID: 100111602016
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21




VILLA, MARIA, MD^{Ft}
Provider ID: 100111602015
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442




 Spanish, Tagalog
Effective as of 01-JAN-21

VILLA, MARIA, MD^{Ft}
Provider ID: 100111602005
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-FEB-18

VO, PHU LUONG, DO^F
Provider ID: 100415527003
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish, Vietnamese
Teleservice
Effective as of 01-NOV-23

VOURLITIS, MELISSA, DO^{Ft}
Provider ID: 100090572016
 9800 GLEN CENTER DR
SAN DIEGO, CA 92131
 (858) 832-2500
Teleservice
Effective as of 01-NOV-23

WONG, CALVIN, MD^{Mt}
Provider ID: 100095226007
 444 W C ST STE 185
SAN DIEGO, CA 92101
 (619) 232-6262
 Chinese, Spanish
Effective as of 01-JUN-11

YUEN, SELENE, MD^{Ft}
Provider ID: 100246155013
 4320 GENESEE AVE STE
103
SAN DIEGO, CA 92117
 (858) 598-6789
 Chinese
Teleservice
Effective as of 01-APR-22


C1. 網絡內提供者清單 初級保健提供者

YUEN, SELENE, MD^{F†}

Provider ID: 100246155015

 4320 GENESEE AVE STE
103

SAN DIEGO, CA 92117

 (858) 598-6789


 Chinese


Teleservice

Effective as of 01-JUN-22

ZINK, IRENE, MD^{F†}

Provider ID: 100324255002

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100


 German


Teleservice

Effective as of 01-AUG-17

ZINK, IRENE, MD^{F†}

Provider ID: 100324255006

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 (619) 662-4100

 German

Teleservice

Effective as of 01-APR-23


FQHC

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC,

Provider ID: PG0025044041

 4725 MARKET ST
SAN DIEGO, CA 92102


 (619) 515-2560

Effective as of 01-JAN-21

DOWNTOWN FAMILY CTR AT CONNECTIONS, †

Provider ID: PG0084437004

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101


 (619) 515-2430

Effective as of 01-JAN-21

FAMILY HEALTH CTR IBARRA, †

Provider ID: PG0084517004

 4874 POLK AVE
SAN DIEGO, CA 92105


 (619) 515-2426

Effective as of 01-JAN-21

FAMILY HEALTH CTR OF SD- ELM ST, †

Provider ID: PG0083911003

 140 ELM ST
SAN DIEGO, CA 92101


 (619) 515-2520

Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: PG0084522003

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105


 (619) 515-2454

Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: PG0084522006

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 (619) 515-2406


Effective as of 01-JAN-21

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: PG0083950003

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113


 (619) 515-2422


Effective as of 01-JAN-21

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE,

Provider ID: PG0085338003

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101


 (619) 515-2525

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: PG0083156003

 3705 MISSION BLVD
SAN DIEGO, CA 92109


 (619) 515-2444

Effective as of 01-JAN-21

FAMILY HLTH CTR SD HILLCREST, †

Provider ID: PG0084516014

 4094 4TH AVE
SAN DIEGO, CA 92103


 (619) 515-2545

Effective as of 01-JAN-21

KING CHAVEZ HEALTH CENTER, †

Provider ID: PG0047560014

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 (619) 662-4100


Teleservice

Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396003

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 (619) 280-4213

Teleservice

Effective as of 01-JAN-21

LINDA VISTA HEALTH CARE CTR,

Provider ID: PG0024858005

C1. 網絡內提供者清單 初級保健提供者

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

(858) 279-0925

Teleservice

Effective as of 01-JUL-22

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: PG0025044044

2204 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 515-2355

Effective as of 01-JAN-21

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: PG0025044036

1809 NATIONAL AVE
SAN DIEGO, CA 92113

(619) 515-2300

Effective as of 01-JAN-21

MID-CITY COMMUNITY CLINIC, †

Provider ID: PG0049261010

4290 POLK AVE
SAN DIEGO, CA 92105

(619) 563-0250

Teleservice

Effective as of 01-JUL-22

MID-CITY COMMUNITY CLINIC,

Provider ID: PG0049261008

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

(619) 280-2058

Effective as of 01-JUL-22

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: PG0031643004

1016 OUTER RD
SAN DIEGO, CA 92154

(619) 429-3733

Teleservice

Effective as of 01-JUL-22

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: PG0084186003

3514 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: PG0025044037

3544 30TH ST
SAN DIEGO, CA 92104

(619) 515-2424

Effective as of 01-JAN-21

OPERATION SAMAHAN - MIRA MESA, †

Provider ID: PG0083606005

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

(844) 200-2426

Effective as of 01-JAN-21

OPERATION SAMAHAN - MIRA MESA,

Provider ID: PG0083606006

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

(844) 200-2426

Effective as of 01-JAN-21

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: PG0083903005

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

(844) 200-2426

Effective as of 01-JAN-21

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: PG0025869017

2630 1ST AVE
SAN DIEGO, CA 92103

(619) 234-2158

Teleservice

Effective as of 01-JUL-22

Indian Health Services: Y

SAN DIEGO FAMILY CARE,

Provider ID: PG0092672004

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

(858) 810-8700

Teleservice

Effective as of 01-JUL-22

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: PG0094135003

316 25TH ST
SAN DIEGO, CA 92102

(619) 238-5551

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHC - OCEAN VIEW, †

Provider ID: PG0047560013

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: PG0094138003

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

(619) 662-4100

C1. 網絡內提供者清單 初級保健提供者

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH PRECISION PARK,

Provider ID: PG0128177002

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

☎ (619) 662-4100

Effective as of 01-APR-24

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: PG0082766003

📍 2391 ISLAND AVE
SAN DIEGO, CA 92102

☎ (619) 515-2435

Effective as of 01-JAN-21

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, †

Provider ID: PG0086361006

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ (619) 233-8500

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

BORRERO, MARCOS, MD^{M†}

Provider ID: 100104392016

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Spanish

Teleservice

Effective as of 01-NOV-20

BORRERO, MARCOS, MD^{M†}

Provider ID: 100104392005

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Spanish

Teleservice

Effective as of 01-MAY-18

BORRERO, MARCOS, MD^{M†}

Provider ID: 100104392018

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Spanish

Teleservice

Effective as of 01-DEC-21

BORRERO, MARCOS, MD^{M†}

Provider ID: 100104392015

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Spanish

Teleservice

Effective as of 01-JAN-21

BORRERO, MARCOS, MD^{M†}

Provider ID: 100104392019

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Spanish

Teleservice

Effective as of 01-JUN-23

DABROWSKI, THOMAS, MD^M

Provider ID: 100343180011

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

☎ (858) 554-1212

Effective as of 01-APR-24

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725006

📍 3969 4TH AVE STE 203
SAN DIEGO, CA 92103

☎ (619) 294-6500

Teleservice

Effective as of 01-JAN-21

GERBATSCH-BORNEMISZA, ILDIKO, MD^{F*}

Provider ID: 100325246016

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

Teleservice

Effective as of 01-JUL-23

GUEFEN, URI, MD^M

Provider ID: 100072802030

📍 555 W C ST STE 102
SAN DIEGO, CA 92101

☎ (858) 554-1212

📄 Spanish

Effective as of 01-DEC-23

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657015

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

☎ (858) 277-9669

📄 Japanese

Effective as of 01-JAN-21

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657010

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

☎ (858) 277-9669

📄 Japanese

Effective as of 01-JUN-20

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657018

📍 5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117

☎ (858) 277-9669

📄 Japanese

Effective as of 01-MAY-22

MIRKARIMI, MORTEZA, MD^{M†}

Provider ID: 100084653010

C1. 網絡內提供者清單 初級保健提供者

3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Faroese, Farsi, Spanish
Effective as of 01-JAN-21

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653003
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Faroese, Farsi, Spanish
Effective as of 01-DEC-12

MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653009
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Faroese, Farsi, Spanish
Effective as of 01-AUG-20

NGUYEN, HUONG, MD^{Ft}

Provider ID: 100104992014
4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
(619) 285-1522
Cambodian, Cantonese,
Mandarin
Effective as of 01-AUG-20

NGUYEN, HUONG, MD^{Ft}

Provider ID: 100104992007
4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
(619) 285-1522
Cambodian, Cantonese,
Mandarin
Effective as of 01-MAR-18

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266017
3811 EL CAJON BLVD

SAN DIEGO, CA 92105
(619) 284-5622
Spanish
Effective as of 01-AUG-20

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266020
3811 EL CAJON BLVD
SAN DIEGO, CA 92105
(619) 284-5622
Spanish
Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266019
3811 EL CAJON BLVD
SAN DIEGO, CA 92105
(619) 284-5622
Spanish
Effective as of 01-JAN-21

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266021
3811 EL CAJON BLVD
SAN DIEGO, CA 92105
(619) 284-5622
Spanish
Effective as of 01-SEP-22

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544020
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
(858) 799-0855
Spanish
Effective as of 01-FEB-24

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544012
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

(858) 799-0855
Spanish
Effective as of 01-DEC-22

AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544019
3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
(858) 799-0855
Spanish
Effective as of 01-SEP-23

BUTLER, LISA, MD^{Ft}

Provider ID: 100068570008
3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Hindi, Italian, Spanish
Effective as of 01-JUN-20

CARAMBAS, CLARITA, MD^{Ft}

Provider ID: 100070756004
9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
(858) 689-1814
Tagalog
Effective as of 01-SEP-22

DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227047
2939 BEYER BLVD
SAN DIEGO, CA 92154
(619) 423-0343
Portuguese, Spanish,
Tagalog
Teleservice
Effective as of 01-JAN-21




DE CARVALHO, CARLOS, MD^{Mt}

Provider ID: 100077227048
2939 BEYER BLVD
SAN DIEGO, CA 92154
(619) 423-0343
Portuguese, Spanish,

C1. 網絡內提供者清單 初級保健提供者

Tagalog
Teleservice
Effective as of 01-SEP-20




DE CARVALHO, CARLOS, MD^{M†}

Provider ID: 100077227054
 2939 BEYER BLVD
 SAN DIEGO, CA 92154
 (619) 423-0343
 Portuguese, Spanish,
 Tagalog
 Teleservice
 Effective as of 01-SEP-22




EL GHONEIMY, AHMED, MD^{M†}

Provider ID: 100103500012
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 255-9155
 Arabic
 Teleservice
 Effective as of 01-AUG-22

EL GHONEIMY, AHMED, MD^{M†}

Provider ID: 100103500013
 4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 (619) 269-1269
 Arabic
 Teleservice
 Effective as of 01-AUG-22

ELIAS, RAMIZ, MD^{M†}

Provider ID: 100105850036
 7695 CARDINAL CT STE
 370-375
 SAN DIEGO, CA 92123
 (858) 384-7072
 Spanish
 Effective as of 01-MAR-18




ELIAS, RAMIZ, MD^{M†}

Provider ID: 100105850039
 7695 CARDINAL CT STE




370-375
 SAN DIEGO, CA 92123
 (858) 384-7072
 Spanish

Effective as of 01-SEP-22




FABELLA, GABRIEL, MD^M

Provider ID: 100011192020
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21




FABELLA, GABRIEL, MD^M

Provider ID: 100011192018
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21




FABELLA, GABRIEL, MD^M

Provider ID: 100011192019
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-JAN-21



FABELLA, GABRIEL, MD^M

Provider ID: 100011192021
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-MAY-23



FABELLA, GABRIEL, MD^M

Provider ID: 100011192003
 10737 CAMINO RUIZ STE 115
 SAN DIEGO, CA 92126
 (858) 695-1262
 Japanese, Spanish, Tagalog
 Effective as of 01-NOV-09



FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921002
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-NOV-21



FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921011
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-JUN-23




FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921006
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-APR-22




FAKHRO, SAMEEH, MD^{M†}

Provider ID: 100379921004
 3490 PALM AVE
 SAN DIEGO, CA 92154
 (619) 423-5616
 Effective as of 01-DEC-21

FRANK, STEWART, MD^{M††}

Provider ID: 100018840004
 4060 4TH AVE STE 605
 SAN DIEGO, CA 92103
 (619) 298-1318
 Spanish
 Effective as of 01-FEB-07

GAVRILYUK, IGOR, MD^{M†}

Provider ID: 100107169005
 4060 4TH AVE STE 100
 SAN DIEGO, CA 92103
 (619) 718-9444
 Russian, Ukrainian
 Effective as of 01-SEP-09

GREEN, BILLIE, MD^{F††}

C1. 網絡內提供者清單 初級保健提供者

Provider ID: 100023101004

 1101 FELSPAR ST
SAN DIEGO, CA 92109
 (858) 483-1720
 French

Effective as of 01-AUG-05

GREEN, BILLIE, MD^{F†}




Provider ID: 100023101005

 1101 FELSPAR ST
SAN DIEGO, CA 92109
 (858) 483-1720
 French

Effective as of 01-SEP-09




GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045016

 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
Effective as of 01-OCT-23




GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045009

 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
Effective as of 01-SEP-20

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045012


 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
Effective as of 01-MAR-23


GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045003

 4540 KEARNY VILLA RD




STE 106

SAN DIEGO, CA 92123
 (858) 430-6656

 Bengali, Hindi, Malay
Effective as of 01-APR-16




GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045011

 4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123
 (858) 430-6656
 Bengali, Hindi, Malay
Effective as of 01-JAN-21



GUHAROY, ASIM, MD^M

Provider ID: 100107045014

 4075 54TH ST
SAN DIEGO, CA 92105
 (858) 598-5654
 Bengali, Hindi, Malay
Effective as of 01-APR-23



HENDRICKS, MARK, MD^{M†}

Provider ID: 100055830004

 2525 CAMINO DEL RIO S
STE 165
SAN DIEGO, CA 92108
 (619) 543-9655
Effective as of 01-AUG-22


HENRY, ANEEL, MD^M

Provider ID: 100418814003

 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
 (858) 554-1212
Effective as of 01-APR-24

HENRY, ANEEL, MD^M

Provider ID: 100418814002

 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
 (858) 554-1212

Effective as of 01-DEC-23

HUA, NATHAN, MD^M

Provider ID: 100408831002

 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
 (858) 277-5463
 Vietnamese

Effective as of 01-JUN-23

HUYNH, ANDREW, MD^M




Provider ID: 100427366002

 4551 EL CAJON BLVD
SAN DIEGO, CA 92115
 (619) 280-7185
Teleservice

Effective as of 01-APR-24



KHEHAR, BHUPINDER, MD^{M†}

Provider ID: 100110360008

 3260 3RD AVE
SAN DIEGO, CA 92103
 (619) 297-3737
 Hindi, Punjabi, Swahili
Effective as of 01-JAN-21



KINGSBURY, A GRANT, MD^{M†}

Provider ID: 100063083007

 4060 4TH AVE STE 102
SAN DIEGO, CA 92103
 (619) 298-2900
Effective as of 01-NOV-22



KURUVADI, NISHA, DO^{F*}

Provider ID: 100412012004

 4276 54TH PL STE B
SAN DIEGO, CA 92115
 (619) 267-0553
Effective as of 01-OCT-23

KURUVADI, NISHA, DO^F

Provider ID: 100412012007

 4276 54TH PL STE B
SAN DIEGO, CA 92115
 (619) 267-0553

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-APR-24

MOSSON, MARK, MD^{M†}

Provider ID: 100176768003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

Effective as of 01-AUG-13

NAJAR, FAUZI, MD^M

Provider ID: 100390568002

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-AUG-22

NAJAR, FAUZI, MD^{M*}

Provider ID: 100390568005

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-JUN-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568003

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-DEC-22

NAJAR, FAUZI, MD^M

Provider ID: 100390568007

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Arabic

Effective as of 01-OCT-23

NGUYEN, NGOCBICH, MD^F

Provider ID: 100084488006

3969 4TH AVE STE 207
SAN DIEGO, CA 92103

(619) 543-0042

Vietnamese

Effective as of 01-FEB-17

O'ROURKE, COURTNEY, DO^F

Provider ID: 100152413026

9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131

(858) 554-1212

Spanish

Effective as of 01-APR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564035

995 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102

(619) 264-1935

Spanish

Effective as of 01-SEP-22

QUINONEZ, JOSE, MD^M

Provider ID: 100085905004

250 MARKET ST
SAN DIEGO, CA 92101

(619) 239-9675

Spanish

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318002

4537 COLLEGE AVE
SAN DIEGO, CA 92115

(619) 265-0504

Spanish, Telugu

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318005

4537 COLLEGE AVE
SAN DIEGO, CA 92115

(619) 265-0504

Spanish, Telugu

Effective as of 01-NOV-18

RIADH, MAYSAM, MD^F

Provider ID: 100413125002

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Arabic

Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD^M

Provider ID: 100422554002

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

(858) 483-5570

Spanish

Effective as of 01-FEB-24

SHI, RONG, MD^{F†}

Provider ID: 100133432007

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Mandarin

Effective as of 01-AUG-15

SPECKART, PAUL, MD^{M††}

Provider ID: 100053933006

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Effective as of 01-FEB-07

SZMIDT, MARIA, MD^F

Provider ID: 100108398006

12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130

(858) 259-5655



Polish, Russian, Spanish

Effective as of 01-JUL-04




TESSIER, ADLA, MD^F

Provider ID: 100077390010




C1. 網絡內提供者清單 初級保健提供者

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 (619) 255-9155
Effective as of 01-JUN-23



VILLA, MARIA, MD^{F†}

Provider ID: 100111602014
 655 SATURN BLVD STE J
SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
Effective as of 01-JAN-21




WAGNER, PAUL, MD^M

Provider ID: 100088692006
 4060 4TH AVE STE 100
SAN DIEGO, CA 92103
 (619) 718-9444
 Spanish
Effective as of 01-JAN-08




WATTS, ELI, MD^{M†}

Provider ID: 100384223003
 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
 (619) 662-4100
Effective as of 01-MAR-22



WILLGING, STEFAN, MD^{M†}

Provider ID: 100106507003
 4060 4TH AVE STE 505
SAN DIEGO, CA 92103
 (619) 298-1318
 German
Effective as of 01-FEB-07

WILLIAMS, HOWARD, MD^{M†}




Provider ID: 100070298003
 4060 4TH AVE STE 505
SAN DIEGO, CA 92103
 (619) 298-1318
 Spanish
Effective as of 01-FEB-07

WOODALL, GARY, MD^{M†}

Provider ID: 100096806003
 2970 5TH AVE STE 140
SAN DIEGO, CA 92103
 (619) 260-3456
Effective as of 01-FEB-07




PEDIATRICS

NGUYEN, HUONG, MD^{F†}



Provider ID: 100104992017
 4444 EL CAJON BLVD STE
6
SAN DIEGO, CA 92115
 (619) 285-1522
 Cambodian, Cantonese,
Mandarin
Effective as of 01-APR-21

FAMILY PRACTICE


ASHIZAWA, JAMES, MD^{M††}



Provider ID: 100056553008
 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
 (949) 661-9600
 Japanese, Spanish
Effective as of 01-JUL-15

GIGER, ANTON, DO^{M†}



Provider ID: 100164128006
 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
 (949) 661-9600
Effective as of 01-OCT-15

GONZALEZ, DAVID, MD^{M†}




Provider ID: 100200908009
 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

 (949) 661-9600
 Spanish
Effective as of 01-JUL-15




HONG, ANDREW, MD^{M†}

Provider ID: 100043550008
 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
 (949) 661-9600
Effective as of 01-OCT-15




NAFICY, K, MD^{M†}

Provider ID: 100104435018
 30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675
 (949) 489-0773
 Farsi, French, Spanish
Teleservice
Effective as of 01-JUL-21

NAFICY, K, MD^{M†}

Provider ID: 100104435017
 30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675
 (949) 489-0773
 Farsi, French, Spanish
Teleservice
Effective as of 01-MAY-21

NAFICY, K, MD^{M†}

Provider ID: 100104435016
 30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675
 (949) 489-0773
 Farsi, French, Spanish
Teleservice
Effective as of 01-MAY-21

C1. 網絡內提供者清單 初級保健提供者

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474013

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-OCT-21

PANDY, LIZANDER, DO^{M†}

Provider ID: 100113474012

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-OCT-21

SERNA, SANDY, MD^{F†}

Provider ID: 100393508002

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Spanish

Effective as of 01-SEP-22

TRINH, MIMI, MD^{F†}

Provider ID: 100105591008

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Vietnamese

Effective as of 01-JUL-15

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531003

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Effective as of 01-SEP-22

ZHENG, VINCENT, DO^{M†}

Provider ID: 100393531002

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Effective as of 01-SEP-22

INTERNAL MEDICINE

FORTMANN, DANIEL, MD^{M*}

Provider ID: 100017458004

32281 CAMINO CPSTRN
C102

SAN JUAN CAPISTRANO,
CA 92675

(949) 493-7981

Effective as of 01-JAN-18

NGUYEN, THUYTRANG, MD^{F†}

Provider ID: 100198226006

30300 CAMINO
CAPISTRANO
SAN JUAN CAPISTRANO,
CA 92675

(949) 240-2272

Spanish, Vietnamese

Effective as of 01-JAN-18

FAMILY PRACTICE

HALIM, NEIL, MD^M

Provider ID: 100153551007

1030 LA BONITA DR STE
316

SAN MARCOS, CA 92078
(760) 744-9626

Arabic, Spanish

Effective as of 01-FEB-13

NATH, DEVARSHI, MD^M

Provider ID: 100138232021

150 VALPREDA RD
SAN MARCOS, CA 92069

(760) 736-6767

Bengali

Effective as of 01-APR-24

WILLIE, KADEN, DO^M

Provider ID: 100350661005

150 VALPREDA RD
SAN MARCOS, CA 92069

(760) 736-6767

Portuguese

Effective as of 01-APR-23

FQHC

TRUECARE,

Provider ID: PG0025086047

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

(760) 736-6767

Effective as of 01-FEB-23

TRUECARE,

Provider ID: PG0025086042

150 VALPREDA RD
SAN MARCOS, CA 92069

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

PONIACHIK, SAMUEL, MD^{M†}

Provider ID: 100099164020

150 VALPREDA RD
SAN MARCOS, CA 92069

(760) 736-6767




Spanish

Effective as of 01-APR-24

PONIACHIK, SAMUEL, MD^{M†}




Provider ID: 100099164012

C1. 網絡內提供者清單 初級保健提供者

 150 VALPREDA RD
SAN MARCOS, CA 92069
 (760) 736-6767
 Spanish
Effective as of 01-OCT-14

WITCZAK, IZABELA, MD^{F†}



Provider ID: 100036527006

 150 VALPREDA RD
SAN MARCOS, CA 92069
 (760) 736-6767
 Polish
Effective as of 01-FEB-19

FAMILY PRACTICE



ALGHAMDI, ASMA, MD^{F†}

Provider ID: 100359014012

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-AUG-22




ALGHAMDI, ASMA, MD^{F†}

Provider ID: 100359014004

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-JAN-21



ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099010

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}




Provider ID: 100360099011

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100

 Spanish
Effective as of 01-JAN-21




ARRIETA, NOEMI, DO^F

Provider ID: 100214881011

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-APR-23




CARRIEDO CENICEROS, MARIA, MD^{F†}

Provider ID: 100066452012

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21




CUTLER, MICHAEL, MD^M

Provider ID: 100225708022

 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
 (619) 264-2591
 Russian, Spanish
Effective as of 01-JAN-24



CUTLER, MICHAEL, MD^M

Provider ID: 100225708024

 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
 (619) 264-2591
 Russian, Spanish
Effective as of 01-APR-24

CUTLER, MICHAEL, MD^M




Provider ID: 100225708025

 4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
 (619) 264-2591

 Russian, Spanish
Effective as of 01-APR-24




DILLON, MAYRA, MD^{F†}

Provider ID: 100163378008

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-NOV-20




HERNANDEZ, RALPH, MD^{M†}

Provider ID: 100080408013

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21



HERNANDEZ, RALPH, MD^{M†}

Provider ID: 100080408021

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-AUG-22




LEE, JOSEPH, MD^{M†}

Provider ID: 100368709004

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-AUG-21

LEPEZ, DAVID, MD^{M†}




Provider ID: 100255267002




 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-NOV-15




LEPEZ, DAVID, MD^{M†}




Provider ID: 100255267005




C1. 網絡內提供者清單 初級保健提供者



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-APR-23


MOYA, MARY, MD^{F*}
Provider ID: 100099596010
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-APR-23




NAVARRO, VANESSA, MD^{F†}
Provider ID: 100173914012
 3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173
 (619) 662-4100
 Filipino, Spanish, Tagalog
Effective as of 01-JAN-21




NAVARRO, VANESSA, MD^{F†}
Provider ID: 100173914015
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Filipino, Spanish, Tagalog
Effective as of 01-AUG-22



ORTEGA, LUIS, MD^{M†}
Provider ID: 100394387002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-OCT-22




ORTIZ ILIZALITURRI, ANA, MD^{F††}
Provider ID: 100394347003
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100

 Spanish
Teleservice
Effective as of 01-OCT-22



RAJAIPOUR, NEGIN, MD^{F†}
Provider ID: 100300998007
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Farsi
Effective as of 01-JAN-21

SNYDER, CHRISTOPHER, DO^{M†}
Provider ID: 100024789042
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21



STALEY, MICHAELA, MD^{F†}
Provider ID: 100359422003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-JAN-21



TALAVERA, GREGORY, MD^M
Provider ID: 100334847007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-APR-23

FQHC




**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR, †**
Provider ID: PG0047542012
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100




Teleservice
Effective as of 01-JAN-21



**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER, †**
Provider ID: PG0047448004
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS,**
Provider ID: PG0047560015
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEGINI, SEPIDEH, MD^F
Provider ID: 100042216003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 German, Persian
Effective as of 01-FEB-24




DILLON, BENEDICT, MD^{M††}
Provider ID: 100166636010
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

PROMER, KATHERINE, MD^{F†}
Provider ID: 100357070007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100



C1. 網絡內提供者清單 初級保健提供者

 Spanish
Effective as of 01-MAY-22




RAMIREZ SANCHEZ, CLAUDIA, MD^{F†}

Provider ID: 100392011002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-AUG-22




SALERNO, MARIANA, MD^{F†}

Provider ID: 100287873007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-MAR-21

SY, RAMON, MD^{M†}



Provider ID: 100062889003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-AUG-22

SY, RAMON, MD^{M†}

Provider ID: 100062889014
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish, Tagalog
Effective as of 01-AUG-22



FAMILY PRACTICE

ADEMA, DONALD, DO^M



Provider ID: 100086591006
 10201 MISSION GORGE RD
STE M
SANTEE, CA 92071
 (619) 596-5445
Effective as of 01-JAN-14

INTERNAL MEDICINE

CORBIN, DAVID, MD^{M†}



Provider ID: 100378968002
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 662-4100
Teleservice
Effective as of 01-NOV-21

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693006
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 (619) 873-3476
Teleservice
Effective as of 01-MAR-21



FAMILY PRACTICE

VOURLITIS, MELISSA, DO^{F*}



Provider ID: 100090572017
 850 DEL MAR DOWNS RD
SOLANA BEACH, CA 92075
 (858) 832-2500
Teleservice
Effective as of 01-NOV-23

INTERNAL MEDICINE

WISNIEWSKI, MORRIS, MD^M



Provider ID: 100018082007
 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
 (858) 554-1212
Effective as of 01-MAR-23

WISNIEWSKI, MORRIS, MD^M

Provider ID: 100018082011
 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
 (858) 554-1212
Effective as of 01-AUG-23



FAMILY PRACTICE

AFFLALO, SUZANNE, MD^F

Provider ID: 100402675004
 10225 AUSTIN DR STE 105
SPRING VALLEY, CA 91978
 (858) 648-0755
Teleservice
Effective as of 01-SEP-23



FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,



Provider ID: PG0025044038
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 (619) 515-2555
Effective as of 01-JAN-21

FAMILY PRACTICE



BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610010
 27190 SUN CITY BLVD
SUN CITY, CA 92586
 (951) 676-4193
Teleservice
Effective as of 01-NOV-20


BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610004
 27190 SUN CITY BLVD
SUN CITY, CA 92586
 (951) 676-4193
Teleservice
Effective as of 01-JAN-20

GANTA, SANYASI, MD^{M†}


Provider ID: 100113069006
 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
 (951) 672-2856


C1. 網絡內提供者清單 初級保健提供者

 Hindi, Spanish, Telugu
Teleservice
Effective as of 01-AUG-16

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069009

 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586


 (951) 672-2856


 Hindi, Spanish, Telugu
Teleservice


Effective as of 01-NOV-17

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069012

 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586

 (951) 672-2856


 Hindi, Spanish, Telugu
Teleservice

Effective as of 01-APR-21

SCHOONMAKER, JOHN, DO^{M†}

Provider ID: 100064979020

 29826 HAUN RD STE 300
SUN CITY, CA 92586

 (951) 679-7022

 Spanish


Effective as of 01-SEP-22


INTERNAL MEDICINE

NGUYEN, DAVID, MD^M

Provider ID: 100105561002

 27830 BRADLEY RD
SUN CITY, CA 92586

 (951) 679-2358

 Vietnamese


Effective as of 01-NOV-12


NGUYEN, THANG, MD^{M†}

Provider ID: 100068936002

 27830 BRADLEY RD

SUN CITY, CA 92586

 (951) 679-2358


 Vietnamese

Effective as of 01-SEP-09

STANFORD, DAVID, MD^{M†}

Provider ID: 100030388002

 29798 HAUN RD STE 308
SUN CITY, CA 92586

 (951) 301-7611

Effective as of 01-SEP-09


FAMILY PRACTICE


AKLADEOS, NERMEEN, MD^F

Provider ID: 100399707003

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193

 Arabic


Teleservice

Effective as of 01-AUG-23

AYON MARTINEZ, CARLOS, MD^M

Provider ID: 100152029007

 41715 WINCHESTER RD
TEMECULA, CA 92590

 (951) 694-9449


 Spanish

Effective as of 01-AUG-20

AYON MARTINEZ, CARLOS, MD^M

Provider ID: 100152029006

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 (619) 440-2751

 Spanish

Effective as of 01-AUG-20


BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834010

 28780 SINGLE OAK DR STE

160

TEMECULA, CA 92590

 (951) 676-4193

 Spanish


Effective as of 01-NOV-20

BAILEY, CRISTINA, MD^{F†}

Provider ID: 100060834004

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193

 Spanish


Effective as of 01-JUN-04

BERNARDO, STACEY, DO^F

Provider ID: 100377889003

 28780 SINGLE OAK DR STE
160

TEMECULA, CA 92590

 (951) 676-4193

Teleservice


Effective as of 01-DEC-21

BLOSSER, JOSHUA, DO^M

Provider ID: 100422006002

 31720 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

 (833) 684-4642


Effective as of 01-JAN-24

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323005

 31170 TEMECULA PKWY
STE 100

TEMECULA, CA 92592

 (951) 698-6090

 Spanish

Effective as of 01-JAN-16



CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735016




 28780 SINGLE OAK DR STE
160

C1. 網絡內提供者清單



初級保健提供者

TEMECULA, CA 92590
 (951) 676-4193
 Spanish
 Effective as of 01-NOV-20



CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735008
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 676-4193
 Spanish
 Effective as of 01-MAR-12




COBIAN, VANESSA, MD^F

Provider ID: 100350271003
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 (951) 225-6400
 Effective as of 01-MAR-22




COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168003
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 676-4193
 Effective as of 01-DEC-18

COMBS, WALTER, MD^{M†}



Provider ID: 100085605005
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 252-8650
 Spanish
 Effective as of 01-JUN-04

COMBS, WALTER, MD^{M†}




Provider ID: 100085605012
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 252-8650
 Spanish

Effective as of 01-NOV-20




DORR, KASIE, DO^F

Provider ID: 100422004002
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 (951) 225-6400
 Effective as of 01-JAN-24




ELKAYAM, ISAK, MD^M

Provider ID: 100400487003
 31720 TEMECULA PKWY STE 200
 TEMECULA, CA 92592
 (760) 520-8100
 Hebrew, Spanish
 Effective as of 01-NOV-23



IM, TAE WOONG, MD^{M†}

Provider ID: 100039015004
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 676-4193
 Korean
 Effective as of 01-JUN-04



JACKSON, ANITA, MD^{F†}

Provider ID: 100060861005
 44274 GEORGE CUSHMAN CT STE 212
 TEMECULA, CA 92592
 (951) 694-4688
 Tagalog
 Effective as of 01-NOV-11



KURAIISHI, AQDAS, MD^{M†}

Provider ID: 100089154013
 31720 TEMECULA PKWY STE 203
 TEMECULA, CA 92592
 (951) 302-4700
 Effective as of 01-FEB-21




MADRID, RICHARD, MD^{M†}

Provider ID: 100077741014
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 676-4193
 Effective as of 01-NOV-20



MADRID, RICHARD, MD^{M†}

Provider ID: 100077741005
 28780 SINGLE OAK DR STE 160
 TEMECULA, CA 92590
 (951) 676-4193
 Effective as of 01-OCT-05



MAJEED, WASAN, MD^F

Provider ID: 100398263003
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 (951) 225-6400
 Arabic
 Effective as of 01-MAR-23



MCDONALD, ROBERT, MD^{M†}

Provider ID: 100093825003
 31493 RANCHO PUEBLO RD STE 107
 TEMECULA, CA 92592
 (951) 303-3337
 Effective as of 01-OCT-09

MCDONALD, MARY, MD^F

Provider ID: 100051408003
 31493 RANCHO PUEBLO RD STE 107
 TEMECULA, CA 92592
 (951) 303-3337
 Effective as of 01-OCT-09

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008
 31720 TEMECULA PKWY
 TEMECULA, CA 92592
 (951) 676-4193
 Effective as of 01-OCT-11

C1. 網絡內提供者清單

初級保健提供者

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562007

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-OCT-11

NWOSU, MICHAEL, MD^M

Provider ID: 100367685005

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Effective as of 01-AUG-22

PHILLIPS, LILY, MD^{F††}

Provider ID: 100113116012

31565 RANCHO PUEBLO RD STE 102B
TEMECULA, CA 92592

(951) 231-1385

Chinese, Mandarin, Spanish

Effective as of 01-SEP-18

POSTE, ALETHEA, MD^F

Provider ID: 100418802002

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Teleservice

Effective as of 01-JAN-24

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398023

31720 TEMECULA PKWY
TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-NOV-20

RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398012

31150 TEMECULA PKWY

STE 200

TEMECULA, CA 92592

(951) 676-4193

Arabic

Effective as of 01-AUG-16

SCHULTZ, JAMES, MD^{M†}

Provider ID: 100030577018

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 225-6400

Farsi, Greek, Spanish

Effective as of 01-AUG-20

SIMMONS, PAMELA, MD^{F†}

Provider ID: 100057995006

28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-JUL-17

VINCENT, WILLIAM, MD^{M†}

Provider ID: 100320230007

31720 TEMECULA PKWY STE 100
TEMECULA, CA 92592

(951) 225-6838

Effective as of 01-MAY-21

WISE, DOUGLAS, DO^{M††}

Provider ID: 100023557005

40285 WINCHESTER RD STE 103
TEMECULA, CA 92591

(951) 296-5844

Effective as of 01-NOV-22

ZEBARJADI, OMID, DO^M

Provider ID: 100379100008

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590

(951) 503-8730

Farsi, Spanish

Teleservice

Effective as of 01-AUG-23

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903010

40285 WINCHESTER RD STE 103
TEMECULA, CA 92591

(951) 296-5844

Spanish

Effective as of 01-NOV-22

ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903006

40285 WINCHESTER RD STE 103
TEMECULA, CA 92591

(951) 296-5844

Spanish

Effective as of 01-SEP-04

ZURITA, DANIELA, MD^{F†}

Provider ID: 100396617008

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

(951) 216-2200

Spanish

Effective as of 01-DEC-22

INTERNAL MEDICINE

BASCH, MICHAEL, MD^{M†}

Provider ID: 100011399007

41593 WINCHESTER RD STE 101
TEMECULA, CA 92590

(951) 719-1111

Arabic, Spanish

Effective as of 01-SEP-09


BLOSSER, NICHELE, DO^F

Provider ID: 100411369003


28780 SINGLE OAK DR STE 160



TEMECULA, CA 92590

C1. 網絡內提供者清單 初級保健提供者


 (951) 676-4193
Effective as of 01-NOV-23


GISI, SYLVIA, MD^F
Provider ID: 100100126002

 31493 RANCHO PUEBLO
RD STE 206
TEMECULA, CA 92592


 (951) 303-6158
 Spanish
Effective as of 01-AUG-19


GOMER, JEREMY, MD^{M†}
Provider ID: 100379005002

 27403 YNEZ RD STE 108
TEMECULA, CA 92591

 (951) 750-7888
Effective as of 01-NOV-21


KIM, IRENE, DO^F
Provider ID: 100380710003

 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590


 (951) 676-4193
Effective as of 01-JAN-22



MAPLETON, SHARINA, DO^F
Provider ID: 100384944005

 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

 (951) 225-6400
Effective as of 01-FEB-24


SALAS, ERNESTO, MD^{M†}
Provider ID: 100093444002

 27699 JEFFERSON AVE STE
311
TEMECULA, CA 92590

 (951) 693-1159
 Spanish, Tagalog
Effective as of 01-NOV-00

HERMAN, SAM, MD^M
Provider ID: 100414181005



 31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679

 (949) 557-0890
Effective as of 01-SEP-23

FAMILY PRACTICE



SCHULTZ, JAMES, MD^M
Provider ID: 100030577024

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 (760) 742-9919
 Farsi, Greek, Spanish
Effective as of 01-MAR-23

SCHULTZ, JAMES, MD^M
Provider ID: 100030577029

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082


 (760) 742-9919
 Farsi, Greek, Spanish
Effective as of 01-JAN-24

FQHC

**NEIGHBORHOOD
HEALTHCARE,**

Provider ID: PG0024990061



 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 (760) 742-9919
Teleservice
Effective as of 01-FEB-24


FAMILY PRACTICE



CASTREJON, JOSEPH, MD^{M*}
Provider ID: 100097250007

 2023 W VISTA WAY STE K
VISTA, CA 92083

 (760) 806-1406
 Spanish
Effective as of 01-SEP-21



CLARK, MA BELEN, MD^{F†}
Provider ID: 100015309003

 1954 VIA CTR STE B
VISTA, CA 92081

 (760) 529-9700
 Tagalog
Effective as of 01-DEC-15



DONNELL, MARTI, MD^{F*}
Provider ID: 100049875024

 134 GRAPEVINE RD
VISTA, CA 92083

 (844) 308-5003
 Spanish
Effective as of 01-JAN-24

DONNELL, MARTI, MD^{F*}
Provider ID: 100049875023



 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

**ESPINOSA-SILVA, YAMINAH,
DO^{F*}**

Provider ID: 100358800014



 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

**ESPINOSA-SILVA, YAMINAH,
DO^{F*}**



Provider ID: 100358800015



 134 GRAPEVINE RD
VISTA, CA 92083



 (760) 631-5000
 Spanish
Effective as of 01-JAN-24



FERBER, JEFFREY, MD^{M††}
Provider ID: 100092669014



C1. 網絡內提供者清單 初級保健提供者




 1926 VIA CTR
VISTA, CA 92081
 (760) 940-7000
Effective as of 01-SEP-21


HIKES, RYAN, MD^M
Provider ID: 100391207004
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
Effective as of 01-NOV-22



HIKES, RYAN, MD^M
Provider ID: 100391207008
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
Effective as of 01-JAN-24




HIKES, RYAN, MD^M
Provider ID: 100391207006
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
Effective as of 01-AUG-23

HURD, MELISSA, MD^{F†}
Provider ID: 100054491003
 161 THUNDER DR STE 103
VISTA, CA 92083
 (760) 758-1988
Effective as of 01-JUL-13




LEONARD, LISA, MD^{F†}
Provider ID: 100278907004
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
 French, Spanish
Effective as of 01-OCT-21




MARTINEZ, LESLY, MD^{F*}
Provider ID: 100397984039
 1000 VALE TERRACE DR
VISTA, CA 92084




 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

MARTINEZ, LESLY, MD^{F*}
Provider ID: 100397984035
 134 GRAPEVINE RD
VISTA, CA 92083
 (760) 631-5000
 Spanish
Effective as of 01-JAN-24

NOVAK, LOREN, DO^{M†}
Provider ID: 100093766013
 1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081
 (760) 940-7000
Effective as of 01-SEP-21




ONG, DONALD, MD^{M†}
Provider ID: 100033027006
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
 Filipino, Spanish, Tagalog
Effective as of 01-JAN-24



POP, SIMONA, MD^{F†}
Provider ID: 100021772013
 145 THUNDER DR
VISTA, CA 92083
 (760) 941-9002
 Romanian
Effective as of 01-NOV-23




RIVERA, MIDORI, MD^F
Provider ID: 100111732027
 204 S SANTA FE AVE
VISTA, CA 92084
 (858) 554-1212
 Japanese, Spanish
Effective as of 01-DEC-23

RIVERA, MIDORI, MD^F




Provider ID: 100111732024

 204 S SANTA FE AVE
VISTA, CA 92084
 (858) 554-1212
 Japanese, Spanish
Effective as of 01-OCT-23

TRAN, DAO, DO^M
Provider ID: 100325638009
 1000 VALE TERRACE DR
VISTA, CA 92084
 (760) 631-5000
 Vietnamese
Effective as of 01-MAR-20

TRAN, DAO, DO^M
Provider ID: 100325638014
 134 GRAPEVINE RD
VISTA, CA 92083
 (760) 631-5000
 Vietnamese
Effective as of 01-JAN-24

TRAN, DAO, DO^M
Provider ID: 100325638002
 134 GRAPEVINE RD
VISTA, CA 92083
 (760) 631-5000
 Vietnamese
Effective as of 01-JUL-19

TRAN, DAO, DO^M
Provider ID: 100325638010
 134 GRAPEVINE RD
VISTA, CA 92083
 (760) 631-5000
 Vietnamese
Effective as of 01-MAR-20

VIDAL, MONICA, DO^{F††}
Provider ID: 100327876041
 134 GRAPEVINE RD
VISTA, CA 92083
 (844) 308-5003
 Spanish

C1. 網絡內提供者清單 初級保健提供者

Effective as of 01-JAN-24

VIDAL, MONICA, DO^{F†}

Provider ID: 100327876045

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

FQHC

VCC DURIAN, †

Provider ID: PG0083886011

105 DURIAN ST STE A
VISTA, CA 92083

(844) 308-5003

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: PG0085050004

134 GRAPEVINE RD
VISTA, CA 92083

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198003

969 S SANTA FE AVE STE A
VISTA, CA 92083

(760) 941-7050

Spanish

Effective as of 01-DEC-17

OLIVA, CARLOS, MD^{M†}

Provider ID: 100102198008

969 S SANTA FE AVE STE A
VISTA, CA 92083

(760) 941-7050

Spanish

Effective as of 01-SEP-22

ONG, DONALD, MD^{M†}

Provider ID: 100033027003

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Filipino, Spanish, Tagalog

Effective as of 01-DEC-10

ONG, DONALD, MD^{M†}

Provider ID: 100033027005

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Filipino, Spanish, Tagalog

Effective as of 01-MAR-20

SMITH, GREGORY, MD^{M*}

Provider ID: 100062596003

161 THUNDER DR STE 207
VISTA, CA 92083

(760) 598-8410

Effective as of 01-DEC-06

INTERNAL MEDICINE

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570008

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570003

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-DEC-07

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570005

1000 VALE TERRACE DR

VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-NOV-20

BRAR, KARANBIR, MD^{M†}

Provider ID: 100305037016

1926 VIA CTR STE A
VISTA, CA 92081

(760) 940-7000

Effective as of 01-SEP-21

CLANCY, TARA, DO^{F††}

Provider ID: 100265397003

2375 S MELROSE DR
VISTA, CA 92081

(760) 305-1900

Effective as of 01-JUL-16

CLANCY, JOHN, DO^{M†}

Provider ID: 100215810013

2375 S MELROSE DR
VISTA, CA 92081

(760) 305-1900

Effective as of 01-SEP-21

DAO, MARC, MD^M

Provider ID: 100307890014

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

French, Vietnamese

Effective as of 01-JUN-23

DAO, MARC, MD^M

Provider ID: 100307890010

1000 VALE TERRACE DR
VISTA, CA 92084

(760) 631-5000

French, Vietnamese

Effective as of 01-FEB-23

DAO, MARC, MD^M

Provider ID: 100307890016

1000 VALE TERRACE DR

C1. 網絡內提供者清單 初級保健提供者

VISTA, CA 92084
☎ (760) 631-5000
📄 French, Vietnamese
Effective as of 01-JAN-24

HALPERIN, JASON, MD^M
Provider ID: 100400241004
📄 134 GRAPEVINE RD
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-JAN-24

KOBAYASHI, GARY, MD^{M†}
Provider ID: 100090343008
📄 145 THUNDER DR STE 1
VISTA, CA 92083
☎ (760) 941-9002
Effective as of 01-SEP-21

LI, XIANGLI, MD^{F†}
Provider ID: 100239749009
📄 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
Effective as of 01-SEP-21

MOASIS, KAREEM, MD^M
Provider ID: 100379398004
📄 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
📄 Arabic
Effective as of 01-JAN-24

NGUYEN, ETHAN, MD^M
Provider ID: 100362686005
📄 145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
Effective as of 01-AUG-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647010
📄 105 DURIAN ST STE B
VISTA, CA 92083

☎ (760) 631-5000
Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F
Provider ID: 100382647007
📄 105 DURIAN ST STE A
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647008
📄 105 DURIAN ST STE B
VISTA, CA 92083
☎ (760) 631-5000
Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647009
📄 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F
Provider ID: 100382647002
📄 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-JAN-22

RHIANNON, JULIA, MD^F
Provider ID: 100382647006
📄 1000 VALE TERRACE DR
VISTA, CA 92084
☎ (760) 631-5000
Effective as of 01-SEP-22

RUTMAN, MICHAEL, DO^{M†}
Provider ID: 100024612023
📄 2355 S MELROSE DR
VISTA, CA 92081
☎ (760) 598-0088
Effective as of 01-JAN-21

RUTMAN, MICHAEL, DO^{M†}
Provider ID: 100024612005
📄 2355 S MELROSE DR
VISTA, CA 92081
☎ (760) 598-0088
Effective as of 01-OCT-00

SHALI, REYZAN, MD^{F†}
Provider ID: 100113968008
📄 1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
📄 Arabic, Hebrew
Effective as of 01-SEP-21

FAMILY PRACTICE

BONNICI, MARCELLA, MD^{F*}
Provider ID: 100072106002
📄 36320 INLAND VALLEY DR
STE 201
WILDOMAR, CA 92595
☎ (951) 816-3233
Effective as of 01-OCT-16

INTERNAL MEDICINE

PATEL, REENABEN, MD^F
Provider ID: 100380064004
📄 36243 INLAND VALLEY DR
STE 160
WILDOMAR, CA 92595
☎ (951) 698-8821
Effective as of 01-JAN-22

C1. 網絡內提供者清單 專科護理醫師

CERTIFIED NURSE PRACTITIONER

WONG, KRISTLE, NP

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 202
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

📍 24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

📍 24541 PACIFIC PARK DR STE 103
ALISO VIEJO, CA 92656
Effective as of 01-OCT-23

DEVELOPMENTAL

BEHAVIORAL PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

📍 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JAN-23

ENDOCRINOLOGY

METABOLISM DIABETES

NADEAU, DANIEL, MD

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

NADEAU, DANIEL, MD

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

ROBERTSON, ASHA, MD

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 205
ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

HEMATOLOGY / ONCOLOGY

IYER, LAXMI, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

IYER, LAXMI, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656
Effective as of 01-NOV-21

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

📍 2 JOURNEY STE 201
ALISO VIEJO, CA 92656*
Effective as of 01-NOV-21

INFECTIOUS DISEASE

BAILEY, CHARLES, MD†

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

BAILEY, CHARLES, MD†

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 301
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

NEUROLOGY

BIXBY, MINDY, DO

Provider ID: N/A

📍 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A

📍 26671 ALISO CREEK RD STE

C1. 網絡內提供者清單 專科護理醫師

203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

LUDEMA, THOMAS, MD†

Provider ID: N/A
☑ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†

Provider ID: N/A
☑ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☑ 5 JOURNEY STE 210

ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

SALEHI, HAMID, MD†

Provider ID: N/A
☑ 26895 ALISO CREEK RD
STE B302
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†

Provider ID: N/A
☑ 27001 MOULTON PKWY
STE A100
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A
☑ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-FEB-23

FELDMAN, GARY, MD†

Provider ID: N/A
☑ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-18

YANNI, ELIZABETH, MD†

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE
200
ALISO VIEJO, CA 92656*
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA

Provider ID: N/A
☑ 26671 ALISO CREEK RD STE

C1. 網絡內提供者清單 專科護理醫師

101
ALISO VIEJO, CA 92656*
Effective as of 01-MAY-23

PODIATRIST

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JUL-21

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

ENG, STEVE, DPM†

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

HEHE, KYLE, DPM

Provider ID: N/A
☒ 15 MAREBLU STE 240

ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A
☒ 15 MAREBLU STE 240
ALISO VIEJO, CA 92656
Effective as of 01-AUG-23

PSYCHIATRY

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656

Effective as of 01-NOV-14

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-JAN-17

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-MAR-20

MARTINEZ, KENNETH, MD

Provider ID: N/A
☒ 5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-NOV-14

PULMONARY DISEASES

GALKO, BARBARA, MD

Provider ID: N/A
☒ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

C1. 網絡內提供者清單 專科護理醫師

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

SURGERY GENERAL

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-APR-21

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

RUSSO, MICHAEL, MD†

Provider ID: N/A

11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAY-21

SURGERY

NEUROLOGICAL

MEHTA, VIKRAM, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

MEHTA, VIKRAM, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

CERTIFIED NURSE

PRACTITIONER

SANDERS, JESSICA, NP†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-NOV-22

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JAN-21

PHILLIPS, KATHERINE, DC

Provider ID: N/A

1620 ALPINE BLVD STE 110

ALPINE, CA 91901

Effective as of 01-FEB-24

FAMILY PRACTICE

VAN HOLLEBEKE, RACHEL, MD

Provider ID: N/A

1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-JUN-23

LICENSED CLINICAL SOCIAL WORKER

KHALEEL, AMMAR, LCSW

Provider ID: N/A

1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-NOV-22

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

CHANG, TOM, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-22

PATEL, GITANE, MD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, GITANE, MD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-JAN-21

PATEL, GITANE, MD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-MAR-18

PATEL, GITANE, MD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-AUG-20

OPTOMETRIST

AOTO, KIM, OD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

DYER, SHARON, OD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-JAN-21

DYER, SHARON, OD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

MARR, RYAN, OD

Provider ID: N/A

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-DEC-22

PSYCHOLOGIST

FRITZ, JENNIFER, PhD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-DEC-22

FRITZ, JENNIFER, PhD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-DEC-22

SMITH, STEPHANIE, PhD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Teleservice

Effective as of 01-AUG-22

SMITH, STEPHANIE, PhD[†]

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Teleservice

Effective as of 01-AUG-22

TORRES, RANDALL, PSYD

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-FEB-24

TORRES, RANDALL, PSYD

Provider ID: N/A

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-FEB-24

OPTOMETRIST

HOLMSTROM, STEVEN, OD[†]

Provider ID: N/A

📍 31722 RAILROAD CANYON
RD

CANYON LAKE, CA 92587

Effective as of 01-JUL-23

ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD[†]

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-20

MADHAV, SANDIP, MD[†]

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

PRASAD, RUPA, MD[†]

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

PRASAD, RUPA, MD[†]

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-23

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

1820 MARRON RD STE 102
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JUN-22

SILVERSTEIN, KAYLI, AuD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-APR-24

CERTIFIED NURSE

PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-SEP-22

BISHOP, LESLIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

BISHOP, LESLIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

HALPERN, DAVID, NP†

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-SEP-22

RICE, ELIZABETH, NP

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-MAR-24

SOLIC, DIANE, NP

Provider ID: N/A

1905 CALLE BARCELONA

STE 211

CARLSBAD, CA 92009

Teleservice

Effective as of 01-OCT-22

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Teleservice

Effective as of 01-AUG-22

CHIROPRACTOR

BERRY, MICHAEL, DC

Provider ID: N/A

6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009

Effective as of 01-APR-15

MILLER, JAMES, DC

Provider ID: N/A

6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009

Effective as of 01-JUL-17

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

ALASANTRO, LORI, PhD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-18

C1. 網絡內提供者清單 專科護理醫師

ALASANTRO, LORI, PhD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

DERMATOLOGY

ANGRA, KUNAL, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21

ANGRA, KUNAL, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21

BUSCH, HEIDI, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

BUSCH, HEIDI, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Teleservice

Effective as of 01-MAR-23

BUSCH, HEIDI, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-23

BUSCH, HEIDI, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-22

RILEY, JESSICA, DO[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-NOV-23

RILEY, JESSICA, DO[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

RILEY, JESSICA, DO[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-21

RILEY, JESSICA, DO[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011*
Effective as of 01-NOV-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

FAMILY PRACTICE

MADHAV, KINJAL, MD[†]

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA[†]

Provider ID: N/A

📄 1820 MARRON RD
CARLSBAD, CA 92008
Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A

📄 1820 MARRON RD STE 102
CARLSBAD, CA 92008
Effective as of 01-SEP-22

NEPHROLOGY

SAVANI, AMAN, MD

Provider ID: N/A

📄 6010 HIDDEN VALLEY RD

C1. 網絡內提供者清單 專科護理醫師

STE 200
CARLSBAD, CA 92011
Effective as of 01-AUG-23

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

BAKER, DAVID, DO

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

CHOUDRY, BILAL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

CHOUDRY, BILAL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

CHOUDRY, BILAL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011
Effective as of 01-FEB-16

DELANEY, MICHAEL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-22

DELANEY, MICHAEL, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-SEP-21

DROKER, BRIAN, MD

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-MAR-24

DROKER, BRIAN, MD

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-DEC-23

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A
☑ 6010 HIDDEN VALLEY RD
STE 200

C1. 網絡內提供者清單
專科護理醫師

CARLSBAD, CA 92011
 Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-FEB-16

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-FEB-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-JAN-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-JAN-24

HO, GILBERT, MD

Provider ID: N/A

5814 VAN ALLEN WAY STE
 209

CARLSBAD, CA 92008
 Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-SEP-22

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-DEC-23

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-APR-24

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-SEP-22

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-FEB-16

LOBATZ, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011
 Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD

STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Effective as of 01-MAR-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Effective as of 01-SEP-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
 STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-16

NIELSEN, AMY, DO†

Provider ID: N/A


6010 HIDDEN VALLEY RD

C1. 網絡內提供者清單 專科護理醫師

STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16


NIELSEN, AMY, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21


OH, IRENE, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21


OH, IRENE, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21


OH, IRENE, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22


OH, IRENE, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16


OMURO, ARTHUR, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22


OMURO, ARTHUR, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-NOV-23


PADUGA, REMIA, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-JAN-24


PADUGA, REMIA, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16


QUESNELL, TARA, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-24


QUESNELL, TARA, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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QUESNELL, TARA, DO[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-SEP-21


SADOFF, MARK, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-21


SADOFF, MARK, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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SADOFF, MARK, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16


SADOFF, MARK, MD[†]

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16


SAVANI, AMAN, MD

Provider ID: N/A

 6010 HIDDEN VALLEY RD
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SCHIM, JACK, MD[†]

Provider ID: N/A

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SCHIM, JACK, MD[†]

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C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-21

SCHIM, JACK, MD†

Provider ID: N/A

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Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

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Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-24

WRIGHT, BRENTON, MD

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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Effective as of 01-AUG-23

YOSHII-CONTRERAS, JUNE, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-JAN-23

NEUROPHYSIOLOGY CLINICAL

PADUGA, REMIA, MD†

Provider ID: N/A

☒ 6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Effective as of 01-NOV-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

☒ 2390 FARADAY AVE
CARLSBAD, CA 92008

Effective as of 01-AUG-22

CALZADA, AUDREY, MD†

Provider ID: N/A

☒ 2390 FARADAY AVE
CARLSBAD, CA 92008

Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

☒ 2390 FARADAY AVE
CARLSBAD, CA 92008

Effective as of 01-MAR-24

DATE, AMIT, MD

Provider ID: N/A

☒ 2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

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CARLSBAD, CA 92008

Teleservice

Effective as of 01-JAN-21

DONALDSON, CHADWICK, MD†

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2390 FARADAY AVE
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Teleservice

Effective as of 01-JAN-21

GOLDSZTEIN, HERNAN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-18

PAUL, SUPRITI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-22

SALGADO, MOSES, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011

Effective as of 01-FEB-18

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-JAN-21

TIAN, QING, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-NOV-21

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-SEP-21

MADHAV, SANDIP, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DE VERA, SARAH, PA

Provider ID: N/A

2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

Teleservice

Effective as of 01-APR-24

DRILLING, KATHERINE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-MAR-23

DU, SARAH, PA

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-APR-24

FANNIN, HANA AH, PA

Provider ID: N/A

2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

Effective as of 01-JAN-23

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

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INOCELDA, ANDREW, PA†

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6010 HIDDEN VALLEY RD
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MEGALI, NICOLE, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Teleservice
Effective as of 01-JAN-24

MEGALI, NICOLE, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Teleservice
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MORENO, SYDNIE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
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Effective as of 01-APR-24

POGGI, SARA, PA

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-23

RAHIM, ARIANNA, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-OCT-23

REUSCH, KEVIN, PA

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
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PSYCHIATRY

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
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Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

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CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CAI, SHEILA, MD[†]

Provider ID: N/A

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CAI, SHEILA, MD[†]

Provider ID: N/A

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CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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Effective as of 01-SEP-22

PAULITSCH-BUCKINGHAM, ANDREA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM, ANDREA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
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PAULITSCH-BUCKINGHAM, ANDREA, MD[†]

Provider ID: N/A

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Effective as of 01-OCT-23

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PSYCHIATRY CHILD

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-SEP-22

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-SEP-22

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-NOV-23

NOEL, NANCY, PhD

Provider ID: N/A

📍 6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

📍 6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

📍 6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

📍 6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

ROSEN, JAY, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

ROSEN, JAY, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

ROSEN, JAY, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
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CARLSBAD, CA 92011

Effective as of 01-SEP-22

ROSEN, JAY, PhD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
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Effective as of 01-JAN-21

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

📍 3070 MADISON ST
CARLSBAD, CA 92008

Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

BOUTELLE, DAVID, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
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DOULL, MATTHEW, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011
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Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008
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TAMAYO, SYDNIE, PT

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice
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SLEEP MEDICINE

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-19

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

SURGERY

NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JUL-23

ADVANCED HEART

FAILURE AND

TRANSPLANT

CARDIOLOGY

DURAN, ANTONIO, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JUL-23

HOAGLAND, PETER, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

ANESTHESIOLOGY

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-OCT-21

MACCHIO, GREGORY, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†

Provider ID: N/A

☐ 752 MEDICAL CENTER CT
STE 206
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

THOMPSON, SANDRA, MD†

Provider ID: N/A

☐ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☐ 2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

MACCHIO, GREGORY, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

☐ 344 F ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DAIRO, BRANDON, MD†

Provider ID: N/A

☐ 340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-22

GLASSER, MARGA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-22

LEE, INSUN, MD†

Provider ID: N/A

☐ 344 F ST STE 203
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

MACCHIO, GREGORY, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-DEC-18

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C203

CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-AUG-17

NAVARRO, ROSA, MD†

Provider ID: N/A

☐ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†

Provider ID: N/A

☐ 752 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
Effective as of 01-JUN-19

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☐ 2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-MAR-22

AUDIOLOGIST

HORNER, HEATHER, AuD†


Provider ID: N/A

☐ 310 3RD AVE STE B21
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-22

JESPERSEN, RHONDA, AuD

Provider ID: N/A


C1. 網絡內提供者清單 專科護理醫師

 310 3RD AVE STE B21
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

CARDIAC ELECTROPHYSIOLOGY


ATHILL, CHARLES, MD†

Provider ID: N/A

 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21


BERMAN, BRETT, MD†

Provider ID: N/A

 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-16


DAWOOD, FARAH, MD†

Provider ID: N/A

 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-DEC-20


LERNER, JONATHAN, MD

Provider ID: N/A

 865 THIRD AVE
STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

PUGH, MATTHEW, DO†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 205

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

PUGH, MATTHEW, DO†

Provider ID: N/A


 765 MEDICAL CENTER CT
STE 205
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-21

SHAH, ABHISHEK, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD


Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911
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CARDIOVASCULAR DISEASE


ABELHAD, NADIA, MD

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

AIZIN, VITALI, MD†

Provider ID: N/A

 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

AIZIN, VITALI, MD†


Provider ID: N/A

 321 E ST STE A

CHULA VISTA, CA 91910
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AIZIN, VITALI, MD†

Provider ID: N/A

 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


BERMAN, BRETT, MD†

Provider ID: N/A

 321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


CARLSON, STEVEN, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22


CARLSON, STEVEN, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21


CARLSON, STEVEN, MD†

Provider ID: N/A

 751 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CEPIN, DANIEL, MD†

Provider ID: N/A

 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

C1. 網絡內提供者清單 專科護理醫師

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-FEB-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-SEP-21

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

DO, HULBERT, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

865 THIRD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

HOURANI, RAYAN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KHAN, HASHIM, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-APR-21

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

NISHIMURA, MARIN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

PONCE, SONIA, MD†

Provider ID: N/A

480 4TH AVE STE 401
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-23

SARSAM, LUAY, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHAH, KULIN, MD[†]

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHAH, KULIN, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHEREV, DIMITRI, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

SHEREV, DIMITRI, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-21

YAU, STEPHEN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

YAU, STEPHEN, MD[†]

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

LAM, KHANH, LAC[†]

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

WILCOX, WENONAH, LAC[†]

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CERTIFIED NURSE

PRACTITIONER

C1. 網絡內提供者清單 專科護理醫師

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-21

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

BURKE, ALICIA, NP

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-22

CARRION GELABERT, ANA, NPF

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

CORREA, CARINA, NP

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

HALE, EMILY, NPF

Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-21

KANTAS, PARIS, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-FEB-24

KELLER, YESENIA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-23

MAGANDA, JESSICA, NP

Provider ID: N/A

340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-24

MAYOYO, MARILYNN, NP

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Effective as of 01-MAR-23

OLESCO, JENNIFER, NP†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

Effective as of 01-NOV-22

PANTOJA, DANICA-ELLA, NP

Provider ID: N/A

340 FOURTH AVE
STE 9
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

SICKLES, MAGGIE, NP

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-DEC-21

SPAULDING, ENJOLI, NP†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

YALDO, ATHMAR, NP†

Provider ID: N/A

429 BROADWAY

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MARTINEZ, NANCY, CRNM

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHIROPRACTOR

WENDEL, TREVOR, DC

Provider ID: N/A

📍 535 H ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

BARNARD, CHRISTOPHER, MD

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Effective as of 01-MAR-24

BARNARD, CHRISTOPHER, MD

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Effective as of 01-MAR-24

MCKESEY, JACQUELINE, MD

Provider ID: N/A

📍 256 LANDIS AVE FL 3
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

RULLAN, PETER, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

RULLAN, JENNIFER, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-MAR-14

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

STEIN, ALEXANDER, MD†

Provider ID: N/A

📍 340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-AUG-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-24

ZALESKI LARSEN, LISA, DO

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23

EMERGENCY MEDICINE

AZAM, ARSALAN, MD

Provider ID: N/A


📍 333 H ST STE 2080
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-24


BRODAK, DANIKA, MD

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-24


DILLMAN, ARIANA, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


DILLMAN, ARIANA, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


EINSTEIN, ERIC, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


EINSTEIN, ERIC, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


FRENCH, TONIANNE, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


FRENCH, TONIANNE, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


GALASSO, MADISON, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


GALASSO, MADISON, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


GRIESINGER, MICHAEL, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


GRIESINGER, MICHAEL, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


HARE, MARC, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-23


HARE, MARC, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


HARRELL-BURDER, BEVERLY, MD†

Provider ID: N/A

 333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


JOURDAIN, VICTOR, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


JOURDAIN, VICTOR, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


MCMILLAN, MONICA, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


NARDI, SEAN, DO†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-DEC-21


PORTILLO, TANIA, MD†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


QUENZER, FAITH, DO†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

QUENZER, FAITH, DO†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

REARDON, JACQUELINE, DO†

Provider ID: N/A

 333 H ST STE 2080
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-22

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SBIROLO, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SBIROLO, EMILY, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

TOVAR, JUAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TRESENITER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

TRESENITER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 2080
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

WHITLEY, NICHOLAS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910*
Effective as of 01-AUG-18

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

480 4TH AVE STE 202A
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-AUG-22

VINCENT, LAUREN, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

VINCENT, LAUREN, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

FAMILY PRACTICE

DILLON, MAYRA, MD

Provider ID: N/A

☐ 880 THIRD AVE
A
CHULA VISTA, CA 91911

Effective as of 01-AUG-23

LOZANO, JUAN, MD

Provider ID: N/A

☐ 1637 THIRD AVE
STE B
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

☐ 480 PALOMAR ST
CHULA VISTA, CA 91911*

Effective as of 01-NOV-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-FEB-23

GASTROENTEROLOGY

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 400 E ST
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

☐ 587 3RD AVE
CHULA VISTA, CA 91910*

Effective as of 01-DEC-23

BAIG, NABIL, DO†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-OCT-22

DESTA, TADDESE, MD

Provider ID: N/A

☐ 296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

DUQUE, JOHN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

DUQUE, JOHN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DUQUE, JOHN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

DUQUE, JOHN, MD†

Provider ID: N/A

☐ 480 4TH AVE STE 316
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

☐ 303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

HASSANEIN, TAREK, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 204
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

256 LANDIS AVE STE 202
CHULA VISTA, CA 91910

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

1323 3RD AVE
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

KORN, ERROL, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 303

CHULA VISTA, CA 91911

Effective as of 01-MAY-23

KORN, ERROL, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 303

CHULA VISTA, CA 91911

Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

296 H ST STE 301
CHULA VISTA, CA 91910

Effective as of 01-JAN-23

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-SEP-22

SWEET, PATRICK, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-22

THOMAS, CARLTON, MD†

Provider ID: N/A

296 H ST
CHULA VISTA, CA 91910

Effective as of 01-APR-21

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

WIENER, GREGORY, MD†

Provider ID: N/A

353 CHURCH AVE STE A
CHULA VISTA, CA 91910*

Effective as of 01-SEP-15

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

310 3RD AVE STE B21/C11
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

450 4TH AVE STE 311

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

BASERI, BABAK, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

BASERI, BABAK, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

ITURBE-ALESSIO, IGNACIO, MD†

Provider ID: N/A

☒ 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23

ITURBE-ALESSIO, IGNACIO, MD†

Provider ID: N/A

☒ 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-FEB-22

JOHNSON, KENNETH, MD†

Provider ID: N/A

☒ 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

MARJON, PHILIP, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

☒ 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

☒ 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-APR-23

NAIDZIONAK, ULADZISLAU, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 9
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

NORTON, MARILYN, MD†

Provider ID: N/A

☒ 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

NORTON, MARILYN, MD†

Provider ID: N/A

☒ 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

QUIROZ, ELISA, MD†

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-21

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

SONG, SEUNG-YIL, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 9
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD

Provider ID: N/A

☒ 678 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHITKARA, PUJA, MD†

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

JAIN, SUPRABHA, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

765 3RD AVE STE 10
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIU, ANDREW, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-23

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MOOLANI, UJJALA, MD

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

NARULA, ARVIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

OLIVER, DEANNA, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

OLIVER, DEANNA, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910*
Effective as of 01-OCT-22

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PONCE, SONIA, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-16

BARVALIA, MIHIR, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-16

C1. 網絡內提供者清單 專科護理醫師

CEPIN, DANIEL, MD[†]

Provider ID: N/A

890 EASTLAKE PKWY STE 205

CHULA VISTA, CA 91914

Effective as of 01-DEC-22

FERNANDEZ, GENARO, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT STE 207

CHULA VISTA, CA 91911

Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD[†]

Provider ID: N/A

890 EASTLAKE PKWY STE 205

CHULA VISTA, CA 91914

Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD[†]

Provider ID: N/A

890 EASTLAKE PKWY STE 205

CHULA VISTA, CA 91914

Effective as of 01-JUN-21

JOHN, ALAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

865 3RD AVE STE 133

CHULA VISTA, CA 91911

Effective as of 01-MAY-23

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY

CHULA VISTA, CA 91910

Effective as of 01-AUG-20

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY

CHULA VISTA, CA 91910

Effective as of 01-APR-21

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

KAFRI, HASSAN, MD[†]

Provider ID: N/A

429 BROADWAY

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD[†]

Provider ID: N/A

480 4TH AVE STE 500

CHULA VISTA, CA 91910*

Effective as of 01-JAN-21

NAGHI, JESSE, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT STE 207

CHULA VISTA, CA 91911

Effective as of 01-JAN-21

NARAYANAN, MEENA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT STE 101

CHULA VISTA, CA 91911

Effective as of 01-FEB-24

OVIEDO-LINARES, RAUL, MD[†]

Provider ID: N/A

754 MEDICAL CENTER CT STE 101

CHULA VISTA, CA 91911

Effective as of 01-OCT-23

PONCE, SONIA, MD[†]

Provider ID: N/A

340 4TH AVE STE 11

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

PONCE, SONIA, MD[†]

Provider ID: N/A

340 4TH AVE STE 11

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

PONCE, SONIA, MD[†]

Provider ID: N/A

450 4TH AVE STE 215

CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT STE 101

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-OCT-23

ROUGH, STEVEN, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-24

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Effective as of 01-APR-23

SHARF, ALBERT, MD

Provider ID: N/A

1310 3RD AVE STE B4
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-OCT-19

SHEREV, DIMITRI, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-APR-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

CAMARGO, SANDRA, MFT

Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911

Effective as of 01-APR-24

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT

Provider ID: N/A

678 3RD AVE

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

FERNANDEZ, RODRIGO, MD†

Provider ID: N/A
450 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

HOREISH, ADAM, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-AUG-15

HOREISH, ADAM, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

HOREISH, ADAM, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HOREISH, ADAM, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

HOREISH, ADAM, MD†

Provider ID: N/A
340 4TH AVE STE 4

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAYAL, ANAS, MD†

Provider ID: N/A
296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

KHAING, KATHY, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KHAING, KATHY, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-APR-19

KHAING, KATHY, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-16

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-AUG-14

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-OCT-22

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-FEB-20

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOLTERO, RICARDO, MD†
Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VIDEEN, JOHN, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†
Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

YUAN, HENRY, MD†
Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

NEUROLOGY

BINDAL, ANKUR, MD†
Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

FARHIDVASH, FARIBA, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

FARHIDVASH, FARIBA, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

GUPTA, MONIKA, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

GUPTA, MONIKA, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

**HOSSEIN ZADEH MALEKI,
ANA, MD**

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

**HOSSEIN ZADEH MALEKI,
ANA, MD**

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MAREK, MAKSYM, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

OLENSKI, KLARI, DO†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

SILVER, BRENT, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SILVER, BRENT, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-21

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

OBSTETRICS / GYNECOLOGY

ANGUIANO, FRANCISCO, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

765 MEDICAL CENTER CT
STE 209
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CHAC, RICK, MD[†]

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

CHAC, RICK, MD[†]

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910

Effective as of 01-SEP-16

CHAC, RICK, MD[†]

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CHAC, RICK, MD[†]

Provider ID: N/A

660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MENDEZ, DIEGO, MD[†]

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-21

SHORT, ABIADE, MD[†]

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-22

OCCUPATIONAL THERAPIST

CUA, NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

CUA, NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-APR-24

HUGHES, ELISA, OT[†]

Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-OCT-23

MORRIS, SHEILA, OT[†]

Provider ID: N/A

1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

OPHTHALMOLOGY

BRYANT, DUANE, MD[†]

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

BRYANT, DUANE, MD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-19

BRYANT, DUANE, MD†

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-19

CARRABY, ARNETT, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CARRABY, ARNETT, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-AUG-20

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

☐ 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, NASRIN, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MANI, NASRIN, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MANI, NASRIN, MD†

Provider ID: N/A

☐ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MASLIN, JESSICA, MD

Provider ID: N/A

☐ 480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD

Provider ID: N/A

☐ 311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

☐ 311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

☐ 311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

☐ 480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

☐ 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

MCDONNELL, EMMA, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONS, MAURICIO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-APR-24

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

SCHER, BARRY, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAR-19

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

C1. 網絡內提供者清單 專科護理醫師

SKAF, AYHAM, MD†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

STAINER, GREGORY, MD†

Provider ID: N/A

📍 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JUL-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

OPTOMETRIST

CHAIN, PEI CHI, OD

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

📍 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KOO, ANITA, OD

Provider ID: N/A

📍 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

📍 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

MASCARENO, EFRAIN, OD†

Provider ID: N/A

📍 440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A

📍 440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

📍 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A

📍 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-SEP-22

NGUYEN, THU, OD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

📍 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

CALZADA, AUDREY, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

577 THIRD AVE,
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

MEHTA, RITVIK, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

SAEZ, NEIL, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

435 H ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

WOO, LINDA, MD†

Provider ID: N/A

321 E ST
CHULA VISTA, CA 91910
Effective as of 01-MAR-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

PEDIATRICS

PIANSAY, MARIA CORAZON, MD

Provider ID: N/A

1637 3RD AVE STE B-F
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

PIANSAY, MARIA CORAZON, MD

Provider ID: N/A

1637 3RD AVE STE H-I
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

ROWHANI, NAGHMEH, MD

Provider ID: N/A

280 E ST
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

TIZNADO, ERNESTO, MD†

Provider ID: N/A

1635 3RD AVE STE L
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

PHYSICAL MEDICINE /

REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KATZEN, SETH, DO

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-23

TAHAEI, SEYED, MD†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN, PA†

Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-22

CHAN, ALONSO, PA[†]

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

DU, SARAH, PA

Provider ID: N/A

📍 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

GUTH, CARA, PA[†]

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

GUTH, CARA, PA[†]

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

INDA, PRISCILLA, PA[†]

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA[†]

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

INDA, PRISCILLA, PA[†]

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA[†]

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA[†]

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KOLODGE, KAITLEN, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

LEE, MYUNGHEE, PA

Provider ID: N/A

📍 340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

LENIHAN, MICHAEL, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

MACASADIA, MARITES, PA

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MENDEZ, JESUS, PA[†]

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA[†]

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA[†]

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ORTEGA-ENDAHL, DAVID, PA

Provider ID: N/A

📍 2648 MAIN ST STE A

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91911
Effective as of 01-OCT-21

PEDROZA, JENNIFER, PA†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 106

CHULA VISTA, CA 91911
Effective as of 01-AUG-20

POGGI, SARA, PA

Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-24

ROBICHAUD, FAITH, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-23

ROBINSON, JENELLE, PA

Provider ID: N/A

340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

SHAH, SHEENA, PA

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

STIFF, TYLER, PA

Provider ID: N/A

296 H ST STE 203
CHULA VISTA, CA 91910

Effective as of 01-APR-24

TAYLOR, RYAN, PA

Provider ID: N/A

480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-24

TODD, RACHEL, PA

Provider ID: N/A

299 J ST
CHULA VISTA, CA 91910

Effective as of 01-JUN-23

VARGAS, CHRISTOPHER, PA

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

WHITE, KYLE, PA

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

WILAND, WINONA, PA

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

CAINE, SAMUEL, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHU, ANDREW, DPM†

Provider ID: N/A
☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-18

DAVIDSON, JOHN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

HAN, KYOUNG, DPM

Provider ID: N/A
☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A
☒ 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAZZA, DAVID, DPM†

Provider ID: N/A
☒ 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

MAZZA, DAVID, DPM†

Provider ID: N/A
☒ 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

MAZZA, DAVID, DPM†

Provider ID: N/A
☒ 276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MORGAN, CRAIG, DPM†

Provider ID: N/A
☒ 276 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-DEC-17

NGUYEN, HAN, DPM

Provider ID: N/A
☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

NGUYEN, HAN, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

☒ 340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

☒ 340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

QUE, HOWIE, DPM

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

READ, TRENTON, DPM

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

SMITH, COLLIN, DPM†

Provider ID: N/A

☒ 855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

☒ 336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

TOUMA, ELIE, DPM

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-20

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-SEP-22

PSYCHIATRY

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A

765 3RD AVE STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914

Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914

Effective as of 01-AUG-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MISHRA, GAURAV, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A


678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD


Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22


NICHOLS, ALPHONSO, MD

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22


PHAM, ALISE, DO

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24


PHAM, ALISE, DO

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24


TROYER, EMILY, MD†

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

TROYER, EMILY, MD†


Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

PSYCHIATRY CHILD


KARIPPOT, ANOOP, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23


KARIPPOT, ANOOP, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22


KARIPPOT, ANOOP, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23


KARIPPOT, ANOOP, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22


MISHRA, GAURAV, MD†

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


MISHRA, GAURAV, MD†

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


NICHOLS, ALPHONSO, MD

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST


BAYLON, ALDO, PSYD

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

BAYLON, ALDO, PSYD

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-AUG-22

CELAYA, PATRICIA, PhD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-22

GALLO, LINDA, PhD

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Effective as of 01-APR-23

GALLO, LINDA, PhD

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Effective as of 01-APR-23

GOULD, HILARY, PhD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GOULD, HILARY, PhD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MAPLES, RANDI, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

MAPLES, RANDI, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910

Effective as of 01-NOV-21

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Effective as of 01-NOV-21

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Effective as of 01-NOV-21

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910

Effective as of 01-NOV-21

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Effective as of 01-NOV-21

PATTERSON-HYATT, KIMBERLY, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305

CHULA VISTA, CA 91910

Effective as of 01-NOV-21

WIJAYARATNE, IMANIE, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

WIJAYARATNE, IMANIE, PSYD†

Provider ID: N/A

1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PULMONARY DISEASES

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-24

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-FEB-21

C1. 網絡內提供者清單 專科護理醫師

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-MAR-21

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910*
Effective as of 01-JAN-14

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE

CHULA VISTA, CA 91910
Effective as of 01-SEP-15

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice

Effective as of 01-DEC-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-OCT-22

MANSY, GINA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

MELL, LOREN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

RAHN, DOUGLAS, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RASH, DOMINIQUE, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

ROSE, BRENT, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

959 LANE AVE

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

UHL, BARRY, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

YORK, JOHN, MD

Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YORK, JOHN, MD

Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-DEC-23

REGISTERED PHYSICAL

THERAPIST

ALLOS, ALEXANDER, PT†

Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT

Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

DAGOSTINO, JACQUELINE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

DORSEY, KYLE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT

Provider ID: N/A
340 FOURTH AVE

STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

HERMAN, RACHEL, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

HERMAN, RACHEL, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-NOV-21

JAIN, ALEXANDRA, PT

Provider ID: N/A
880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT†

Provider ID: N/A
1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT

Provider ID: N/A
320 BROADWAY STE 2
CHULA VISTA, CA 91910*
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A
2417 FENTON ST STE A
CHULA VISTA, CA 91914*
Effective as of 01-JUL-22

C1. 網絡內提供者清單 專科護理醫師

NGUYEN, TIA, PT

Provider ID: N/A

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PHILLIP, OMARI, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

POLIS, NICK, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT†

Provider ID: N/A

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT

Provider ID: N/A

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-15

CHITKARA, PUJA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAR-16

CHWA, JEFFREY, DO

Provider ID: N/A

765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

HAMMETT, ERIN, DO†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHANNA, SURABHI, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

REDDY, DANA, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-FEB-19

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

333 H ST STE 5000
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUN-22

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

786 3RD AVE STE 5000
CHULA VISTA, CA 91910

Effective as of 01-APR-24

SURGERY GENERAL

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

ARCOVEDO, RODOLFO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JUN-19

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-19

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

BARRERA, HUGO, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-SEP-14

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-OCT-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

786 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-NOV-22

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HSU, BRADFORD, MD†

Provider ID: N/A

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

HSU, ANDREW, MD†

Provider ID: N/A

480 4TH AVE STE 404

C1. 網絡內提供者清單 專科護理醫師

CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HSU, BRADFORD, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HUANG, MARK, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-OCT-17

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MORAL, JOHN, MD

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

MORAL, JOHN, MD

Provider ID: N/A

☒ 480 4TH AVE STE 404
CHULA VISTA, CA 91910

Effective as of 01-SEP-23

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-MAY-20

SPITZER, BLAKE, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

SUMMERS, STEPHEN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-21

TALEBZADEH, NOJAN, MD†

Provider ID: N/A

☒ 246 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR

MORENO MARTINEZ, ENRIQUE, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

☒ 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAR-24

SURGERY HAND

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914

Effective as of 01-DEC-21

SURGERY

NEUROLOGICAL

WHITE, DANIEL, MD†

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910

Effective as of 01-MAR-23

WHITE, DANIEL, MD†

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910

Effective as of 01-OCT-21

WHITE, DANIEL, MD†

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910

Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911*

Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Effective as of 01-MAR-24

BRERETON, DANIEL, DO†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Effective as of 01-DEC-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT

STE 14

CHULA VISTA, CA 91911

Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911*

Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 296 H ST STE 203

CHULA VISTA, CA 91910

Effective as of 01-JAN-24

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT

C1. 網絡內提供者清單 專科護理醫師

STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A
☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

GROTTING, JOHN, MD

Provider ID: N/A
☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A
☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

HOFMEISTER, ERIC, MD†

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

HOFMEISTER, ERIC, MD†

Provider ID: N/A
☒ 955 LANE AVE STE 200

CHULA VISTA, CA 91914
Effective as of 01-FEB-18

KIMBALL, MICHAEL, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

KLATMAN, SAMUEL, MD†

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KLATMAN, SAMUEL, MD†

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A
☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A
☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A
☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

RICKARDS, ENASS, MD

Provider ID: N/A
☒ 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910*
Effective as of 01-FEB-07

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A
☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-09

TAYYAB, NEIL, MD[†]

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

TAYYAB, NEIL, MD[†]

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TAYYAB, NEIL, MD[†]

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

TAYYAB, NEIL, MD[†]

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TAYYAB, NEIL, MD[†]

Provider ID: N/A

☒ 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914

Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914

Effective as of 01-NOV-23

SURGERY THORACIC

HUANG, MARK, MD[†]

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-17

HUANG, MARK, MD[†]

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD[†]

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD[†]

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-17

SURGICAL ONCOLOGY

QUIROZ, ELISA, MD[†]

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-22

UROLOGY

COHEN, EDWARD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

GRIMALDI, JOHN, DO[†]

Provider ID: N/A

☒ 450 4TH AVE STE 312
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

GRIMALDI, JOHN, DO[†]

Provider ID: N/A

☒ 450 4TH AVE STE 312
CHULA VISTA, CA 91910*

Effective as of 01-JAN-14

JUMA, SAAD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

NGUYEN, HUNG, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-SEP-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

750 MEDICAL CENTER CT

STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-21

VAPNEK, EVAN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

NAVA, PETER, NP

Provider ID: N/A

517 N HORNE ST
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

818 PIER VIEW WAY
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

PEDIATRICS

RONAN, KEVIN, MD

Provider ID: N/A

818 PIER VIEW WAY
CMP PENDLETON, CA
92054
Effective as of 01-MAY-23

EMERGENCY MEDICINE

EL SAID, KHALED, MD†

Provider ID: N/A

11882 DE PALMA RD STE
2F-1
CORONA, CA 92883
Teleservice

Effective as of 01-MAR-24

INFECTIOUS DISEASE

RESTREPO, DALILAH, MD†

Provider ID: N/A

3334 E COAST HWY PMB
655

C1. 網絡內提供者清單 專科護理醫師

CORONA DEL MAR, CA
92625
Effective as of 01-AUG-22

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A
801 ORANGE AVE STE 205
CORONADO, CA 92118
Teleservice
Effective as of 01-JUN-22

CARDIOVASCULAR DISEASE

MAI, TUAN, MD†

Provider ID: N/A
230 PROSPECT PL STE 250
CORONADO, CA 92118
Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

GOSHEN, KIRSTEN, NP†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

BAIG, NABIL, DO†

Provider ID: N/A
131 ORANGE AVE STE 101B
CORONADO, CA 92118
Teleservice
Effective as of 01-OCT-22

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA†

Provider ID: N/A
801 ORANGE AVE
CORONADO, CA 92118
Effective as of 01-SEP-22

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118*
Effective as of 01-DEC-22

OLIVER, DEANNA, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118

Effective as of 01-APR-21

OLIVER, DEANNA, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-MAR-21

NEPHROLOGY

DAVIS, JASON, MD†

Provider ID: N/A
230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A
230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A
230 PROSPECT PL STE
340B
CORONADO, CA 92118
Effective as of 01-MAR-16

HAMMES, JOHN, MD

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

C1. 網絡內提供者清單

專科護理醫師

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA, PA

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

SURGERY GENERAL

BHOYRUL, SUNIL, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD†

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD

Provider ID: N/A

230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

230 PROSPECT PL STE 230
CORONADO, CA 92118*
Teleservice
Effective as of 01-MAR-24

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118

Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20

SALEM, CAROL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

OPTOMETRIST

SPAETH, JOHN, OD

Provider ID: N/A

24040 CAMINO DEL AVION
STE G
DANA POINT, CA 92629
Effective as of 01-SEP-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-JAN-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629

Effective as of 01-OCT-23

PHYSICIANS ASSISTANT

JEFFREY, JAMES, PA

Provider ID: N/A

24060 CAMINO DEL AVION
STE A
DANA POINT, CA 92629
Effective as of 01-NOV-23

PSYCHOLOGIST

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

1349 CAMINO DEL MAR
STE D
DEL MAR, CA 92014
Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

HANSEN, CHRISTINA, PA
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-OCT-23

LEE, ISABEL, PA
Provider ID: N/A

1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014
Teleservice
Effective as of 01-DEC-23

SZABO, HAYLIE, PA
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-OCT-22

PSYCHIATRY

COLOGNE, SCOTT, MD†
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

COLOGNE, SCOTT, MD†
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO†**
Provider ID: N/A

12835 POINTE DEL MAR

WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

PSYCHOLOGIST

**ROSENGARTEN, ARTHUR,
PhD†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014*
Effective as of 01-MAY-23

ROSENGARTEN, ARTHUR, PhD
Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014*
Effective as of 01-MAY-23

**ROSENGARTEN, ARTHUR,
PhD†**
Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014*
Effective as of 01-MAY-23

C1. 網絡內提供者清單
專科護理醫師

ROSENGARTEN, ARTHUR, PhD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014*
Effective as of 01-MAY-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC

BROWN, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

THUNDER, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR

WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-JAN-22

***ANESTHESIOLOGY PAIN
MANAGEMENT***

COHEN, ZACHARY, MD†

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

***CARDIOVASCULAR
DISEASE***

ABELHAD, NADIA, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
212
EL CAJON, CA 92020
Effective as of 01-JAN-22

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

CARLSON, STEVEN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Teleservice
Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21

C1. 網絡內提供者清單 專科護理醫師

HOURANI, RAYAN, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

NAGHI, JESSE, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

NISHIMURA, MARIN, MD

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

YAU, STEPHEN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-AUG-22

ZAVARO, SUHAIL, MD[†]

Provider ID: N/A

📍 300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

CERTIFIED

ACUPUNCTURIST

LAROWE, ALEXISS, LAC

Provider ID: N/A

📍 470 N MOLLISON AVE
EL CAJON, CA 92021

Effective as of 01-MAY-23

LAROWE, ALEXISS, LAC

Provider ID: N/A

📍 470 N MOLLISON AVE
EL CAJON, CA 92021

Effective as of 01-MAY-23

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-21

SLOAN, ERICA, LAC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-24

SLOAN, ERICA, LAC

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-MAR-24

CERTIFIED NURSE

PRACTITIONER

BRANNEN, MANDY, NP[†]

Provider ID: N/A

📍 215 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

CHUDACEK, JANET, NP[†]

Provider ID: N/A

📍 215 W MADISON AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

JOHNSON, KIMBERLY, NP[†]

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-21

LUCKETT, DE COURCY, NP[†]

Provider ID: N/A

📍 1580 N 2ND ST

EL CAJON, CA 92021

Effective as of 01-JAN-21

MAYOYO, MARILYNN, NP

Provider ID: N/A

📍 300 S PIERCE ST STE 102
EL CAJON, CA 92020

Effective as of 01-MAY-23

MURRAY, CARLA, NP

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-FEB-24

PIRTLE, KEYSHONE, NP[†]

Provider ID: N/A

📍 5442 SYCUAN RD
EL CAJON, CA 92019

Effective as of 01-SEP-21

REAL, MARIA, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 1032 BROADWAY

C1. 網絡內提供者清單 專科護理醫師

EL CAJON, CA 92021
Teleservice
Effective as of 01-JUL-21

SIRLEAF, MASSANU, NP†
Provider ID: N/A

📄 1351 BROADWAY
EL CAJON, CA 92021
Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP
Provider ID: N/A

📄 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-DEC-21

WILLIAMS, SHANTRICE, NP
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

WILLIAMS, BREAHA, NP
Provider ID: N/A

📄 165 S 1ST ST
EL CAJON, CA 92019
Effective as of 01-DEC-21

YALDO, ATHMAR, NP†
Provider ID: N/A

📄 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

HAMMOND, HEATHER, CRNM
Provider ID: N/A

📄 470 N MOLLISON AVE
EL CAJON, CA 92021
Effective as of 01-MAY-23

HAMMOND, HEATHER, CRNM†
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

HAMMOND, HEATHER, CRNM†
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-20

CHIROPRACTOR

DORADO, SUE, DC
Provider ID: N/A

📄 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

DORADO, SUE, DC
Provider ID: N/A

📄 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

FULKS, ZACKARY, DC
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

HALEY, STEVEN, DC
Provider ID: N/A

📄 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

HALEY, STEVEN, DC
Provider ID: N/A

📄 165 S 1ST ST

EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

MANSOUR, RASHAD, DC
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-23

MCCOWN, BARRY, DC
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

ZECHA, RONALD, DC
Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

DERMATOLOGY

BARRIO, VICTORIA, MD
Provider ID: N/A

📄 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

BARRIO, VICTORIA, MD
Provider ID: N/A


📄 292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†
Provider ID: N/A


📄 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-OCT-21

BROGAN, JACQUELINE, MD†
Provider ID: N/A


C1. 網絡內提供者清單 專科護理醫師

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22


CELANO, NICHOLAS, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


CELANO, NICHOLAS, MD
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


CELANO, NICHOLAS, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


CHIANG, JENNIFER, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


CHIANG, JENNIFER, MD
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


CHIANG, JENNIFER, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

CHIANG, JENNIFER, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-MAR-18

GONZALEZ, JOSE, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice


Effective as of 01-MAY-23

GONZALEZ, JOSE, MD†
Provider ID: N/A


 292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-AUG-22


GORDON, JUSTIN, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22


GORDON, JUSTIN, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22


HANSEN, DOYLE, MD†
Provider ID: N/A

 1679 E MAIN ST STE 208
EL CAJON, CA 92021
Effective as of 01-JAN-14


KASSAB, GHADA, MD
Provider ID: N/A

 624 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-23


KASSAB, GHADA, MD
Provider ID: N/A

 624 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-23


KASSAB, GHADA, MD
Provider ID: N/A

 330 S MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


LIN, SHINKO, MD
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


LIN, SHINKO, MD
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-24


SATEESH, BROOKE, MD†
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-MAR-16

SATEESH, BROOKE, MD
Provider ID: N/A


 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

SATEESH, BROOKE, MD
Provider ID: N/A


 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

SATEESH, BROOKE, MD†
Provider ID: N/A


C1. 網絡內提供者清單 專科護理醫師

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


TYAGI, ABHILASHA, MD[†]
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22


TYAGI, ABHILASHA, MD
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


TYAGI, ABHILASHA, MD[†]
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22

UEBELHOER, NATHAN, DO
Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

UEBELHOER, NATHAN, DO[†]
Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-FEB-22

EMERGENCY MEDICINE

YAU, STEPHEN, MD[†]
Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice

Effective as of 01-APR-23

FAMILY PRACTICE

SHAFT, ALEXANDER, MD[†]

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD[†]

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-OCT-21

GASTROENTEROLOGY

CUBAS, IVAN, MD[†]


Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-JUL-18

DESTA, TADDESE, MD[†]

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-JUL-18

DESTA, TADDESE, MD[†]

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-APR-24

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

 463 N MAGNOLIA AVE STE

A

EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-FEB-21

HASSANEIN, TAREK, MD[†]

Provider ID: N/A


 463 N MAGNOLIA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-SEP-22

NOVO, MEGAN, MD

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-23

NOVO, MEGAN, MD


Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-MAY-23

SCHAEFFER, CYNTHIA, MD[†]


Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

Effective as of 01-JUL-18

SHAFFER, KATHERINE, MD[†]

Provider ID: N/A

 2732 NAVAJO RD STE 201
EL CAJON, CA 92020

Effective as of 01-JAN-21

THOMAS, CARLTON, MD[†]

Provider ID: N/A

 2732 NAVAJO RD STE 200


C1. 網絡內提供者清單 專科護理醫師

EL CAJON, CA 92020
Effective as of 01-JUL-18

GENERAL PRACTICE

ALSHAMMARY, MOHAMMED, MD


Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-MAY-23

HEARING AID DEALER / SUPPLIER


ANDERSON, ELAINE, MA†

Provider ID: N/A

 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22


DANDURAND, JOHN, MA†

Provider ID: N/A

 1767 E MAIN ST
EL CAJON, CA 92021
Teleservice
Effective as of 01-JAN-21


DAVIS, KELLE, MA†

Provider ID: N/A

 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

 1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

INTERNAL MEDICINE

AWDISHO, ALAN, DO†


Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice

Effective as of 01-SEP-22


MANSOUR, DAVID, DO†

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-AUG-22


MAY, LOUIS, MD†

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-DEC-22


MICHAEL, RAMI, MD†

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

OLIVER, DEANNA, MD†

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-MAR-21

OLIVER, DEANNA, MD†


Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020*
Effective as of 01-OCT-22

INTERVENTIONAL CARDIOLOGY

BARVALIA, MIHIR, MD†

Provider ID: N/A


 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†


Provider ID: N/A

 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice

Effective as of 01-NOV-22


JOHN, ALAN, MD

Provider ID: N/A

 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-MAY-23


KAFRI, HASSAN, MD†

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22


KAFRI, HASSAN, MD†

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-21


KAFRI, HASSAN, MD†

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-19

KAFRI, HASSAN, MD†

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-SEP-22

NAGHI, JESSE, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Effective as of 01-JAN-24

PONCE, SONIA, MD†

Provider ID: N/A

☐ 328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-21

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

☐ 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

SHARF, ALBERT, MD

Provider ID: N/A

☐ 1240 BROADWAY STE 210
EL CAJON, CA 92021
Effective as of 01-JAN-24

SHARF, ALBERT, MD

Provider ID: N/A

☐ 230 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

☐ 1380 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

☐ 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

FRAGOSO, DOMINIQUE, LCSW

Provider ID: N/A

☐ 215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

ORLANDO, FRANCESCA, LCSW

Provider ID: N/A

☐ 215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

TAYAG, DYLAN, LCSW†

Provider ID: N/A

☐ 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-SEP-22

TAYLOR, MISTY, LCSW

Provider ID: N/A

☐ 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-FEB-24

WELSH, BRITT, LCSW†

Provider ID: N/A

☐ 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-21

MARRIAGE FAMILY THERAPIST

ARNOLD, REBECCA, MFT

Provider ID: N/A

☐ 855 E MADISON AVE

EL CAJON, CA 92020
Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

☐ 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

☐ 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

☐ 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

BULLOCH, EDGAR, MD†

Provider ID: N/A

☐ 133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-JUN-22

DAVIS, TRACIE, MD

Provider ID: N/A

☐ 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

DAVIS, TRACIE, MD

Provider ID: N/A

☐ 1032 BROADWAY
EL CAJON, CA 92021
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

**FOLCH TORRES-AGUIAR,
BEATRIZ, MD†**

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-AUG-22

**FOLCH TORRES-AGUIAR,
BEATRIZ, MD†**

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-NOV-21

SEAVEY, MICHELLE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-23

TAJRAN, DEENA, MD†

Provider ID: N/A

291 E LEXINGTON AVE STE
AC
EL CAJON, CA 92020

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

BINDER, NICHOLAS, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

BOECKMANN, JESSICA, MD†

Provider ID: N/A

450 FLETCHER PKWY
EL CAJON, CA 92020

Effective as of 01-JAN-21

HSU, CHRISTOPHER, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

HSU, CHRISTOPHER, MD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

MANI, NASRIN, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

MCDONNELL, EMMA, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-NOV-22

PATEL, GITANE, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, SARJAN, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, GITANE, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

C1. 網絡內提供者清單 專科護理醫師

PATEL, SARJAN, MD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-DEC-23

PONS, MAURICIO, MD†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

☒ 231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-AUG-22

PRABHU, SUJATA, MD

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

PRABHU, SUJATA, MD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

SKAF, AYHAM, MD†

Provider ID: N/A

☒ 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

ZHAO, TAILUN, MD

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-DEC-23

DYER, SHARON, OD†

Provider ID: N/A

☒ 225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD†

Provider ID: N/A

☒ 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

☒ 231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

☒ 231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-JAN-24

ZVANUT, DONALD, OD†

Provider ID: N/A

☒ 225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

ZVANUT, DONALD, OD

Provider ID: N/A

☒ 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA

Provider ID: N/A

☒ 165 S 1ST ST
EL CAJON, CA 92019

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-JUN-21

HABBOUSH, RANA, PA

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-APR-21

ROSENBLATT, SHERI, PA

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUN-23

RYAN, TYLER, PA†

Provider ID: N/A

📍 463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020

Effective as of 01-DEC-22

PODIATRIST

FARMER, STEVEN, DPM†

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JUL-21

PSYCHIATRY

DIA, ALI, MD†

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-DEC-22

DIA, ALI, MD†

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Teleservice

Effective as of 01-DEC-22

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY, PT†

Provider ID: N/A

875 EL CAJON BLVD

EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019*
Effective as of 01-JUL-22

SURGERY ORTHOPEDIC

NOURI, LABEED, MD

Provider ID: N/A

330 S MAGNOLIA AVE STE
302
EL CAJON, CA 92020
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

TORIOLA, ABIODUN, NP

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
EL TORO, CA 92630
Effective as of 01-JUL-23

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

AVALOS, ROY, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BACKMAN, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JUN-21

C1. 網絡內提供者清單 專科護理醫師

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

HARRINGTON, JOHN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Effective as of 01-MAR-22

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KULHANEK, JAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MCGINTY, PATRICK, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

RASCH, DAMIAN, DO†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-22

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-22

SHEREV, DIMITRI, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-SEP-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-FEB-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024

Effective as of 01-MAY-23

JULIAN, FIDES, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Effective as of 01-AUG-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

YOO, HEATHER, LAC

Provider ID: N/A

477 N EL CAMINO REAL
STE C204

ENCINITAS, CA 92024

Effective as of 01-APR-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Effective as of 01-SEP-22

CARDINELL, ANNA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

CHAMBERS, KATRINA, NP

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DWYER, ERIN, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

FAIQ, JAMILA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HERR, COLLEEN, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KORMANIK, PATRICIA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

MOORE, HEATHER, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024

Effective as of 01-APR-24

MORENO, KATHERINE, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

MYERS, JESSE, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PACHOE, MADISON, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†
Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

POVOLI, LAUREN, NPF
Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SRILASAK, MICHELE, NP†
Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

STUBBE, AMANDA, NPF
Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SYMANSKI, ELIZABETH, NP†
Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP†
Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

WALLA, MEGAN, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

WOODRUFF, WHITNEY, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

**CERTIFIED REGISTERED
NURSE ANESTHETIST**

ASHMAN, RANDY, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JUL-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

FITZPATRICK, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE

C1. 網絡內提供者清單 專科護理醫師

102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KING, APRIL, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA, CRNM

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-21

BRAUN, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-NOV-23

BROUHA, BROOK, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GLADSJO, JULIE, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

285 N EL CAMINO REAL
STE 117

C1. 網絡內提供者清單 專科護理醫師

ENCINITAS, CA 92024
Effective as of 01-JAN-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-23

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A


 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

Effective as of 01-SEP-22

TOMPKINS, STACY, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024


Effective as of 01-MAY-19

ENDOCRINOLOGY

METABOLISM DIABETES

SHAH, NANDI, MD

Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

FAMILY PRACTICE

ANDERSON, LINDSEY, DO†

Provider ID: N/A

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-AUG-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

 662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-AUG-21

GASTROENTEROLOGY

ALHANKAWI, DHUHA, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Effective as of 01-APR-23

ALHANKAWI, DHUHA, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Effective as of 01-AUG-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE

100

ENCINITAS, CA 92024

Effective as of 01-DEC-23

BORTNIKER, ETHAN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A


 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Effective as of 01-MAR-24

DILAURO, STEVEN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE

102

ENCINITAS, CA 92024

Effective as of 01-JAN-21

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-OCT-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JUN-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JAN-24

MADANI, BAHAR, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-FEB-22

PATEL, JANKI, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-FEB-24

PATEL, JANKI, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

PATEL, JANKI, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

PATEL, JANKI, MD

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

PATEL, JANKI, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

PATEL, JANKI, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-MAR-24

SINGH, MARVIN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Effective as of 01-JUN-23

SINGH, MARVIN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-18

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-OCT-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105

ENCINITAS, CA 92024
Effective as of 01-JAN-24

SULLIVAN, JESSICA, DO†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

DELANEY, CODY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE

C1. 網絡內提供者清單 專科護理醫師

220
ENCINITAS, CA 92024*

Teleservice

Effective as of 01-OCT-22

DESGRANGES, PATRICK, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Teleservice

Effective as of 01-NOV-21

EISMAN, SCOTT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

ELLIS, ADAM, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-AUG-21

LIU, STEVEN, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

NARDI, MELISSA, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

NELKIN, CORY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Teleservice

Effective as of 01-OCT-21

NGUYEN, ANDY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

NGUYEN, ALEXIE, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024

Effective as of 01-JAN-21

PHAM, STEVEN, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Teleservice

Effective as of 01-NOV-21

RUMMANI, BENNY, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JUL-21

STEADMAN, MICHAEL, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-APR-21

TRAN, AMY, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

Effective as of 01-JAN-21

TRING, ELEANOR, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

FUSSELL, KEVIN, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-JUL-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

INTERVENTIONAL CARDIOLOGY

BHATIA, PRERANA, MD

Provider ID: N/A

477 N EL CAMINO REAL
ENCINITAS, CA 92024

Effective as of 01-AUG-23

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Effective as of 01-SEP-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-NOV-20

LICENSED CLINICAL SOCIAL WORKER

REBELO, MARCIA, LCSW

Provider ID: N/A

187 CALLE MAGDALENA
STE 212
ENCINITAS, CA 92024

Effective as of 01-OCT-23

MEDICAL ONCOLOGY

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

MCCLAY, EDWARD, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Effective as of 01-FEB-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

LAKHERA, YOGITA, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A

☒ 354 SANTA FE DR
ENCINITAS, CA 92024

Effective as of 01-JAN-24

SCHORR, EMILY, MD

Provider ID: N/A

☒ 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-MAR-24

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

☒ 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

DELCORE, LAURA, MD†

Provider ID: N/A

☒ 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

☒ 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

☒ 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

Effective as of 01-SEP-22

DRIEBE, AMY, MD†

Provider ID: N/A

☒ 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-SEP-22

HILL, KAITLYN, MD†

Provider ID: N/A

☒ 477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Effective as of 01-SEP-21

Teleservice

Effective as of 01-SEP-21

HILL, KAITLYN, MD†

Provider ID: N/A

☒ 477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Teleservice

Effective as of 01-APR-23

MACKAY, GILLIAN, MD

Provider ID: N/A

☒ 1200 GARDEN VIEW RD

ENCINITAS, CA 92024

Effective as of 01-DEC-23

SPRING ROBINSON, CHANDRA, DO

Provider ID: N/A

☒ 477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024

Effective as of 01-JAN-23

OPHTHALMOLOGY

FISH, STEVEN, MD

Provider ID: N/A

☒ 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

☒ 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

☒ 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

FISH, STEVEN, MD

Provider ID: N/A

☒ 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-APR-22

JOHNSTON, ERIC, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-MAY-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-FEB-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-MAR-21

VIECHNICKI, TARA, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-DEC-11

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104

ENCINITAS, CA 92024
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-24

OPTOMETRIST

CAO-NGUYEN, TIEN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUL-23

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DEAN, MOENA, OD†

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-22

MARR, RYAN, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-DEC-22

SOLIS, KEVIN, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-23

TAN, CONNIE, OD

Provider ID: N/A

477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-21

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-20

OTOLARYNGOLOGY

REUTHER, MARSHA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PEDIATRICS

KOOROS, KOOROSH, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

DAS, GOURAB, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

DOUGHERTY, CLARA, PA†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GILLAN, JAMES, PA†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JAN-22

MORENO, SYDNIE, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-APR-24

PELIO, DARREN, PA†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-22

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

501 N EL CAMINO REAL
STE 510
ENCINITAS, CA 92024
Effective as of 01-DEC-21

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

DUSTIN, ADAM, DPM†

Provider ID: N/A

326 ENCINITAS BLVD STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

GILLES, LOUIS, DPM

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-AUG-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201

ENCINITAS, CA 92024
Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM†

Provider ID: N/A

1011 DEVONSHIRE DR STE F
ENCINITAS, CA 92024
Effective as of 01-AUG-15

RUETENIK, BRAD, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

PSYCHOLOGIST

GOMEZ, JUANITA, PhD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

PULMONARY DISEASES

C1. 網絡內提供者清單

專科護理醫師

EISMAN, SCOTT, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

FUSSELL, KEVIN, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HSING, ANDREW, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

HSING, ANDREW, MD†

Provider ID: N/A

☐ 320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LIANG, NI-CHENG, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

LIANG, NI-CHENG, MD†

Provider ID: N/A

☐ 320 SANTA FE DR STE 107C

ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

☐ 320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

MAKANI, SAMIR, MD†

Provider ID: N/A

☐ 320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PINO, ALEJANDRO, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

SARNOFF, ROBERT, MD†

Provider ID: N/A

☐ 320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

TRAN, SHERI, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

☐ 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-23

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

☐ 1200 GARDEN VIEW RD

C1. 網絡內提供者清單 專科護理醫師

ENCINITAS, CA 92024
Effective as of 01-JUN-23

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

HORN, ADAM, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

MACEWAN, IAIN, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MANSY, GINA, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MELL, LOREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MURPHY, JAMES, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-DEC-23

RAHN, DOUGLAS, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

ROSE, BRENT, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SANDHU, AJAY, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SEIBERT, TYLER, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SHARABI, ANDREW, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SIMPSON, DANIEL, MD

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

WHITE, EVAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

YASHAR, CATHERYN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

DOULL, MATTHEW, PT

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MENN, STUART, MD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101

ENCINITAS, CA 92024

Effective as of 01-MAR-23

SURGERY COLON

SURGERY

PARRY, LISA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Effective as of 01-APR-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Effective as of 01-JUL-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204

ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204

ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-AUG-15

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204

ENCINITAS, CA 92024

Effective as of 01-JUL-20

SURGERY GENERAL

VASCULAR

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

AFRA, ROBERT, MD†

Provider ID: N/A

317 N EL CAMINO REAL STE
405

ENCINITAS, CA 92024

Effective as of 01-JAN-16

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-MAR-23

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-DEC-19

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-20

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-23

GROTTING, JOHN, MD

Provider ID: N/A

☒ 477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024

Effective as of 01-NOV-23

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

KIM, PAUL, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-SEP-22

MEINEKE, RYAN, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

MEINEKE, RYAN, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

☒ 332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

☒ 519 ENCINITAS BLVD STE
106
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

☒ 499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

☒ 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-NOV-21

GUPTA, ABHAY, MD

Provider ID: N/A

☒ 351 SANTA FE DR STE 250
ENCINITAS, CA 92024
Effective as of 01-MAY-23

GUPTA, ANSHU, MD

Provider ID: N/A

☒ 700 GARDEN VIEW CT STE
208
ENCINITAS, CA 92024

Effective as of 01-MAY-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD†

Provider ID: N/A

☒ 499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

UROLOGY

COHEN, EDWARD, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-APR-16

COHEN, EDWARD, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

☒ 320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JUL-22

DATO, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-NOV-21

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-SEP-22

NEUSTEIN, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108

ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-FEB-24

VAPNEK, EVAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

YUH, BENJAMIN, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

ANESTHESIOLOGY

FARUQUE, TANIA, MD†

Provider ID: N/A

255 N ELM ST STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

COHEN, ZACHARY, MD

Provider ID: N/A

940 E VALLEY PKWY STE K
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-22

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

PRASAD, RUPA, MD[†]

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

ROBINSON, COLE, MD

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-23

AUDIOLOGIST

HERRERA, CHARITY, AuD[†]

Provider ID: N/A

330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HORNER, HEATHER, AuD[†]

Provider ID: N/A

330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-22

CARDIAC ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SAWHNEY, NAVINDER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 320
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SHAH, ABHISHEK, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107

ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLSON, STEVEN, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

DO, HULBERT, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

MALEK, MIKHAIL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

MOUSSAVIAN, MEHRAN, DO[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

NARAYANAN, MEENA, MD[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

PARIKH, MILIND, DO[†]

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

C1. 網絡內提供者清單 專科護理醫師

SARSAM, LUAY, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SERRY, ROD, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SHAH, KULIN, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CERTIFIED ACUPUNCTURIST

CHEN, SISI, LAC†

Provider ID: N/A

📍 240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KIM, MIN JOO, LAC†

Provider ID: N/A

📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-21

CARNEY, AMY, NP

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-23

GARVIN, JOSEPH, NP†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-JAN-22

KONYN, CATHERINE, NPF

Provider ID: N/A

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-APR-23

MANCHESTER, KAREN, NP

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

MEYERS, JUDITH, NP†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 300
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MILLER, JEAN, NP

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

NEGRON, CAROLINE, NP

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

RICE, ELIZABETH, NP

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SPAULDING, ENJOLI, NP†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

TRAN, DAPHNE, NP

Provider ID: N/A

📍 2125 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-FEB-23

C1. 網絡內提供者清單 專科護理醫師

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

SEILNACHT-BERNARD, KAREN, CRNA†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HAMMOND, HEATHER, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC

Provider ID: N/A

2065 S ESCONDIDO BLVD
STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

KEYS, ANNA, DC

Provider ID: N/A

240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUN-21

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

STEIN, ALEXANDER, MD

Provider ID: N/A

1101 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

VENKAT, ARUN, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-13

EMERGENCY MEDICINE

HARE, MARC, MD

Provider ID: N/A

☒ 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

BAILEY, TIMOTHY, MD

Provider ID: N/A

☒ 625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025

Effective as of 01-OCT-23

FARJOUDI, FARHAD, MD

Provider ID: N/A

☒ 2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029

Effective as of 01-FEB-24

FAMILY PRACTICE

COBIAN, VANESSA, MD

Provider ID: N/A

☒ 728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☒ 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

☒ 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-FEB-23

GASTROENTEROLOGY

CHELIMILLA, HARITHA, MD

Provider ID: N/A

☒ 488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025

Effective as of 01-OCT-20

CHELIMILLA, HARITHA, MD

Provider ID: N/A

☒ 735 E OHIO AVE STE 204
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

CHELIMILLA, HARITHA, MD

Provider ID: N/A

☒ 735 E OHIO AVE STE 204
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

GARA, NAVEEN, MD†

Provider ID: N/A

☒ 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

GARA, NAVEEN, MD†

Provider ID: N/A

☒ 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 488 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-22

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

☒ 330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

INTERNAL MEDICINE

CHEN, ANDREW, MD

Provider ID: N/A

☒ 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029

Effective as of 01-MAR-23

LIU, ANDREW, MD

Provider ID: N/A

☒ 631 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-SEP-23

LY, SOPHEAP, MD

Provider ID: N/A

☒ 728 E VALLEY PKWY

C1. 網絡內提供者清單 專科護理醫師

ESCONDIDO, CA 92025
Effective as of 01-NOV-23

OLIVER, DEANNA, MD†

Provider ID: N/A
📍 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Effective as of 01-MAR-22

PEARCE, DANIEL, DO

Provider ID: N/A
📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD

Provider ID: N/A
📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GILBERT, CHRISTOPHER, MD

Provider ID: N/A
📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GORWIT, JEFFREY, MD

Provider ID: N/A
📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A
📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A
📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A
📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A
📍 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VANICHSARN, CHRISTOPHER, MD

Provider ID: N/A
📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BECERRA, GABRIEL, LCSW

Provider ID: N/A
📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHRISTENSEN, PATTI, LCSW

Provider ID: N/A
📍 1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GUZZO, RICHARD, LCSW

Provider ID: N/A
📍 1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A
📍 1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A
📍 1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MAGOS, DANIEL, LCSW

Provider ID: N/A
📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A
📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A
📍 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW
Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

CABRERA, JOANNE, MFT
Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

HOLLEMAN, KEVIN, DO
Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

PRATHER, ALLYSON, MFT
Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

TIZNADO, MONICA, MFT
Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

NEPHROLOGY

AL-DAHHAN, ZAID, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-23

AL-DAHHAN, ZAID, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

AL-DAHHAN, ZAID, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

AL-DAHHAN, ZAID, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE

ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†
Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

C1. 網絡內提供者清單 專科護理醫師

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-17

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

SHAPIRO, MARK, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

SHAPIRO, MARK, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-19

DROKER, BRIAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102

C1. 網絡內提供者清單 專科護理醫師

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

PADUGA, REMIA, MD†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

QUESNELL, TARA, DO†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JAN-24

SAVANI, AMAN, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

SHAPIRO, MARK, MD†

Provider ID: N/A

📍 631 E GRAND AVE
ESCONDIDO, CA 92025*
Teleservice
Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

WANG, ANCHI, MD†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-21

NEUROPHYSIOLOGY CLINICAL

QUESNELL, TARA, DO†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA, MD

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029*
Effective as of 01-MAY-24

BABKINA, NATALIA, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BABKINA, NATALIA, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
308
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BULLOCH, EDGAR, MD

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BULLOCH, EDGAR, MD

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

📍 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CIZMAR, BRANISLAV, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
311
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

HINSHAW, PAUL, DO†

Provider ID: N/A

📍 1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

HUSKEY, DANA, MD

Provider ID: N/A

📍 488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

OPHTHALMOLOGY

AVALLONE, THOMAS, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-APR-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

HUDSON, HENRY, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MORTON, ASA, MD†

Provider ID: N/A

📍 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-NOV-21

C1. 網絡內提供者清單

專科護理醫師

MORTON, ASA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

PATEL, GITANE, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PRABHU, SUJATA, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300

ESCONDIDO, CA 92025
Effective as of 01-AUG-20

ROESKE, RICHMOND, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-23

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

JULAZADEH, SARA, OD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22

KHIEU, TINA, OD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

KHIEU, TINA, OD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

SCOTT, JEFFREY, OD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23

TONNU, ANH, OD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PHYS MED/ REHAB PAIN MEDICINE

RICHARDSON, HENRY, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PHYSICAL MEDICINE / REHABILITATION

TAHAEI, SEYED, MD†

Provider ID: N/A

215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BALDWIN, DONNA, PA†

Provider ID: N/A

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-FEB-21

COLESON, PAMELA, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

DANESHVAR, ABRAHAM, PA

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-23

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HUANG, STEPHANIE, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MEGALI, NICOLE, PA

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

MONTES, VIVIAN, PA

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-APR-23

NG, EUNICE, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

NIAKAMAL, EVAN, PA†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

WICKWARE, TRACY, PA

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

WICKWARE, TRACY, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-APR-24

WILE, KIMBERLY, PA

Provider ID: N/A

625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025

Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-NOV-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

HAN, KYOUNG, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-JAN-22

LARKINS, PHILIP, DPM

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

MEYER, JOAN, DPM

Provider ID: N/A

1147 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-APR-24

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JAN-23

MORRIS, JASON, DPM

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-SEP-22

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUN-21

NEGRON, RICARDO, DPM

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-21

READ, TRENTON, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-APR-23

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-MAY-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

Effective as of 01-FEB-21

TOUMA, ELIE, DPM†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-FEB-23

TOUMA, ELIE, DPM

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-APR-23

PSYCHIATRY

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

FANOUS, ASHRAF, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FU, KATHERINE, MD

Provider ID: N/A

📄 704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

FU, KATHERINE, MD

Provider ID: N/A

📄 704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

KOH, STEVE, MD†

Provider ID: N/A

📄 704 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

KOH, STEVE, MD†

Provider ID: N/A

📄 255 N ASH ST STE 101
ESCONDIDO, CA 92027
Teleservice
Effective as of 01-JAN-22

KOH, STEVE, MD†

Provider ID: N/A

📄 704 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

KOH, STEVE, MD†

Provider ID: N/A

📄 255 N ASH ST STE 101
ESCONDIDO, CA 92027
Teleservice
Effective as of 01-JAN-22

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📄 221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

📄 425 N DATE ST

C1. 網絡內提供者清單 專科護理醫師

ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD

Provider ID: N/A
488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A
488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLTON PENN, CORNELIA, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CARLTON PENN, CORNELIA,

PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLTON PENN, CORNELIA, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CARLTON PENN, CORNELIA, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CHAO, BRIAN, PhD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHAO, BRIAN, PhD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GUARDADO-SOTO, RAQUEL, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GUARDADO-SOTO, RAQUEL, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

C1. 網絡內提供者清單

專科護理醫師

MEJIAS, JUAN, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

PULMONARY DISEASES

BENDER, FRANK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

POPPER, STEVEN, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

QUAN, MICHELE, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

RADIATION ONCOLOGY

COLEMAN, LORI, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-OCT-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200

ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

VOLPP, PAUL, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-FEB-24

FARRAR, COURTNEY, PT

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JUL-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

1340 W VALLEY PKWY STE
201
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-JAN-21

SPEECH PATHOLOGIST

CALDERON MORALES,

ASTRID, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025
Effective as of 01-APR-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SURGERY GENERAL

C1. 網絡內提供者清單 專科護理醫師

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GROVE, JAY, MD†

Provider ID: N/A

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

***SURGERY GENERAL
VASCULAR***

BULKIN, ANATOLY, MD†

Provider ID: N/A

📍 625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CHANG, ALEXANDER, MD†

Provider ID: N/A

📍 625 CITRACADO PKWY STE

203
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

NEMCEFF, DENNIS, MD†

Provider ID: N/A

📍 625 CITRACADO PKWY STE
203
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

📍 1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

***SURGERY
NEUROLOGICAL***

STERN, MARK, MD†

Provider ID: N/A

📍 705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

STERN, MARK, MD†

Provider ID: N/A

📍 705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

KNUTSON, THOMAS, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PALANCA, ARIEL, MD

Provider ID: N/A

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, RAMIN, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 310
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

📍 488 E VALLEY PKWY STE
316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SURGERY THORACIC

LIN, YUAN, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

ANTHONY, JULIAN, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

SANGODKAR, SANDEEP, DO[†]

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

SANGODKAR, SANDEEP, DO[†]

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

CERTIFIED ACUPUNCTURIST

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

WACHNER, KRISTELYN, LAC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

CERTIFIED NURSE PRACTITIONER

HAMED, JACQUELYN, NP

Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-NOV-23

KELLEHER, BRIDGET, NP

Provider ID: N/A

321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-APR-24

STARICKA, MELISSA, NPF

Provider ID: N/A

1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-23

CHIROPRACTOR

BARTZ, PAUL, DC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC[†]

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-24

DERMATOLOGY

GILBOA, RUTH, MD[†]

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

ROSS, ANDREW, MD[†]

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ROSS, ANDREW, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

ROSS, ANDREW, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A

1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

WONG, DARRYL, MD†

Provider ID: N/A

1309 S MISSION RD STE A

FALLBROOK, CA 92028
Effective as of 01-JUN-21

GASTROENTEROLOGY

HONG, JOHN, MD†

Provider ID: N/A

521 E ELDER ST STE 104
FALLBROOK, CA 92028
Effective as of 01-JAN-21

INTERNAL MEDICINE

COX, JEREMY, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

INTERVENTIONAL CARDIOLOGY

BISWAS, MIMI, MD

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-NOV-23

MESSENGER, BRADLEY, MD†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028

Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO

Provider ID: N/A

591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-OCT-23

NEUROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-SEP-17

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-15

UDDIN, MOHAMMAD, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☞ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☞ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☞ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-JUL-19

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☞ 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-APR-22

OBSTETRICS / GYNECOLOGY

STIGEN, THERESA, MD†

Provider ID: N/A

☞ 577 E ELDER ST STE K
FALLBROOK, CA 92028
Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-23

JOHNSON, ROGER, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

ZHOU, SIWEI, MD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028*
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-23

BULLUM, ANTHONY, OD†

Provider ID: N/A

☞ 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

COOPER, MICHAEL, OD†

Provider ID: N/A

☞ 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

PEDIATRICS

ROBINSON, DAISY, MD

Provider ID: N/A

☞ 321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAR-23

RONAN, KEVIN, MD

Provider ID: N/A

☞ 321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

SERING, MALIA, PA†

Provider ID: N/A

☞ 1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PODIATRIST

FARMER, STEVEN, DPM†

Provider ID: N/A

☞ 1309 S MISSION RD

C1. 網絡內提供者清單 專科護理醫師

FALLBROOK, CA 92028
Effective as of 01-JUL-21

FARMER, STEVEN, DPM†

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

📍 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

ALLERGY IMMUNOLOGY

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

YOSHII, DENIS, DO†

Provider ID: N/A

📍 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-23

YOSHII, DENIS, DO†

Provider ID: N/A

📍 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-23

YOSHII, DENIS, DO†

Provider ID: N/A

📍 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

CERTIFIED NURSE PRACTITIONER

KHAN, AHAD, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

SORIA, JULIE, NP

Provider ID: N/A

📍 26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610*

Effective as of 01-APR-22

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

📍 27462 PORTOLA PKWY STE
201
FOOTHILL RANCH, CA
92610

Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD

Provider ID: N/A

📍 26700 TOWNE CENTRE DR
STE 170
FOOTHILL RANCH, CA
92610

Effective as of 01-DEC-23

ENDOCRINOLOGY

METABOLISM DIABETES

AHL, SCOTT, DO†

Provider ID: N/A

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

C1. 網絡內提供者清單
專科護理醫師

GASTROENTEROLOGY

ASHBY, KEVIN, MD

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-20

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE

104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

LEE, PAUL, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

**OBSTETRICS /
GYNECOLOGY**

DAVIS, STEPHANIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-FEB-23

DEJBAKSH, SHEILA, MD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

MILLER, JAMIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PRICE, KERRY, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DUGGAN, VERONICA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA

92610

Effective as of 01-JAN-23

DUGGAN, VERONICA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

VU, BAO-KHOI, PA†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-20

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD†

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-21

RHEUMATOLOGY

MAHMOOD, FARAH, MD†

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 165
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-20

SALEM, YASSER, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-13

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-17

SURGERY PLASTIC

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100

FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-12

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-FEB-22

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-JUL-23

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

SALEH, HANA, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-MAY-15

HYUN, SUZANNE, MD

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545

Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

PANG, GARY, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102

HEMET, CA 92545

Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102

HEMET, CA 92545

Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-14

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-17

GUIANG, RAINIER, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102

C1. 網絡內提供者清單 專科護理醫師

HEMET, CA 92545
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102

HEMET, CA 92545
Effective as of 01-MAY-21

KANU, ABDUL, MD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
HEMET, CA 92543

Teleservice

Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203

HEMET, CA 92543
Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
102

HEMET, CA 92545
Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

AGARWAL, ASHOK, MD

Provider ID: N/A

☒ 136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-23

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-AUG-22

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-21

AGGARWAL, SAURABH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-AUG-22

AMIN, JATIN, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-MAY-21

AMIN, JATIN, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-SEP-18

ATTIA, NADER, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-SEP-18

ATTIA, NADER, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-MAR-20

BISWAS, MIMI, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

Effective as of 01-SEP-18

COX, JEREMY, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Effective as of 01-SEP-18

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-AUG-23

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
104

HEMET, CA 92545

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-MAY-21

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-SEP-09

RASTOGI, ANISHA, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-AUG-20

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

RASTOGI, ANISHA, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-FEB-21

RASTOGI, ANIL, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A

HEMET, CA 92543

Effective as of 01-SEP-00

RIVA, GREGORY, MD†

Provider ID: N/A

☐ 1275 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-MAY-15

CERTIFIED NURSE PRACTITIONER

ABAYA, HONEYLYNN, NP

Provider ID: N/A

☐ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-23

ADEDAYO, TOLULOPE, NP†

Provider ID: N/A

☐ 422 N SAN JACINTO ST STE
A
HEMET, CA 92543

Effective as of 01-APR-21

ADEDAYO, TOLULOPE, NP

Provider ID: N/A

☐ 1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-FEB-24

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-22

AGUILAR, MICHELLE, NP†

Provider ID: N/A

☐ 1000 E LATHAM AVE STE G
HEMET, CA 92543

Effective as of 01-MAY-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE

AMJAD, NP†

Provider ID: N/A

☐ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

AMJAD WARYAM, ASHEE

C1. 網絡內提供者清單 專科護理醫師

AMJAD, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

ANUFORO, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

ANUFORO, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BRAR, SUKHDEEP, NP

Provider ID: N/A

📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-SEP-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

EDEM, MARY, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-MAY-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201

HEMET, CA 92543
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-20

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUL-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JONES, LAKESHA, NP†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

JONES, LAKESHA, NP†
Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

KUMAR, NINA, NP
Provider ID: N/A

☞ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

KUMAR, NINA, NP†
Provider ID: N/A

☞ 422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-APR-21

LAWHORN, CHRISTA, NPF
Provider ID: N/A

☞ 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-JAN-24

LE, NGUYEN, NP
Provider ID: N/A

☞ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LEANO, ANYLOU, NP†
Provider ID: N/A

☞ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MELOT, KAREN, NP
Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MILLON, TINA, NPF

Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

☞ 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

NGUYEN, ANDY, NP†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

NGUYEN, ANDY, NP†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

O'NEIL, NICOLE, NP†

Provider ID: N/A

☞ 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-MAR-22

ONUOHA, NOJA, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-23

ONUOHA, NOJA, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

PAULHUS, PATRICIA, NP†

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†
Provider ID: N/A

3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAR-20

RATAJCZAK, CELESTE, NP
Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-FEB-24

SALAS-AMIGON, BRENDA, NP†
Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-AUG-18

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-DEC-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAR-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE 104
HEMET, CA 92543
Effective as of 01-OCT-22

SHARTZER, ANNA, NP†
Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-22

SHEIKH, SARAH, NP
Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-MAY-23

SHEIKH, SARAH, NP
Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-OCT-16

SHIH, LU-HSUN, NP
Provider ID: N/A

225 LAURSEN ST
HEMET, CA 92543
Effective as of 01-APR-24

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

VALDEVERONA, KATHY, NP†
Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-NOV-19

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VENTURA, ALEXIS, NP
Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

C1. 網絡內提供者清單 專科護理醫師

VIDAL, ALYSSA, NPF

Provider ID: N/A

☞ 3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☞ 3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☞ 3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

☞ 3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-23

WILLIAM, PHEBEE, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

WILLIAM, PHEBEE, NP†

Provider ID: N/A

☞ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

ZELEDON, JAIME, NP

Provider ID: N/A

☞ 422 N SAN JACINTO ST STE B
HEMET, CA 92543
Effective as of 01-MAY-18

HEMET, CA 92543
Effective as of 01-MAY-18

CHIROPRACTOR

BROWN, KEVIN, DC

Provider ID: N/A

☞ 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC

Provider ID: N/A

☞ 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC†

Provider ID: N/A

☞ 2940 W FLORIDA AVE STE B
HEMET, CA 92545
Effective as of 01-MAR-22

BROWN, KEVIN, DC†

Provider ID: N/A

☞ 2940 W FLORIDA AVE STE B
HEMET, CA 92545
Effective as of 01-MAR-22

HINES, TAYTE, DC

Provider ID: N/A

☞ 903 E DEVONSHIRE AVE STE D
HEMET, CA 92543
Effective as of 01-JAN-24

ROBINSON, DEAN, DC

Provider ID: N/A

☞ 903 E DEVONSHIRE AVE STE D
HEMET, CA 92543
Effective as of 01-JUL-22

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☞ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-SEP-09

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☞ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-JUL-23

WACHHOLZ, PAMELA, DC

Provider ID: N/A

☞ 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-FEB-11

DERMATOLOGY

HARFORD, ROBERT, MD†

Provider ID: N/A

☞ 750 E LATHAM AVE STE 3
HEMET, CA 92543
Effective as of 01-DEC-20

MITCHELL, JESSE, MD

Provider ID: N/A

☞ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☞ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☞ 3989 W STETSON AVE STE 201
HEMET, CA 92545

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

☐ 3989 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE 201
HEMET, CA 92545

Effective as of 01-JUL-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-OCT-21

OBEREMOK, STEVE, MD

Provider ID: N/A

☐ 901 S STATE ST STE 100
HEMET, CA 92543

Effective as of 01-AUG-23

OBEREMOK, STEVE, MD

Provider ID: N/A

☐ 720 E LATHAM AVE STE 1
HEMET, CA 92543*

Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201

HEMET, CA 92543

Teleservice

Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

☐ 850 E LATHAM AVE STE 201
HEMET, CA 92543

Teleservice

Effective as of 01-OCT-21

SEYFZADEH, MANOUCHEHR, MD†

Provider ID: N/A

☐ 1280 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-14

EMERGENCY MEDICINE

MATHUR, ARVIND, MD†

Provider ID: N/A

☐ 975 SAINT JOHN PL
HEMET, CA 92543

Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-JUL-21

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-NOV-23

HAIDER, SHANZAY, MD

Provider ID: N/A

☐ 1515 W FLORIDA AVE

HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-APR-24

SEYED, KAZEM, MD†

Provider ID: N/A

☐ 750 E LATHAM AVE STE 1
HEMET, CA 92543

Effective as of 01-AUG-20

**C1. 網絡內提供者清單
專科護理醫師**

FAMILY PRACTICE

**CHAMBI-HERNANDEZ, RUTH,
MD**

Provider ID: N/A

1035 SAINT JOHN PL
HEMET, CA 92543

Effective as of 01-MAY-23

GASTROENTEROLOGY

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-SEP-09

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-AUG-20

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-MAY-15

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-MAY-15

CHAKRABARTY,

MILANKUMAR, MD†

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-JUL-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

949 CALHOUN PL STE A
HEMET, CA 92543

Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-APR-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-JAN-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101

HEMET, CA 92543

Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543

Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543

Effective as of 01-DEC-22

SINGHVI, AJEET, MD†

Provider ID: N/A

397 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-DEC-17

***HEMATOLOGY /
ONCOLOGY***

AGA JANIAN, RICHY, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-JUL-23

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544

Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544

Effective as of 01-AUG-22

C1. 網絡內提供者清單

專科護理醫師

BANTA, WARREN, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

BELLO, OSAGIE, MD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE

105
HEMET, CA 92544
Effective as of 01-OCT-23

LEE, BYUNG, DO†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

MOST, CAROLE, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

SARWARI, NAWID, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-24

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

☞ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

C1. 網絡內提供者清單 專科護理醫師

SHAIKH, ANWER, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-24

SHAIKH, ANWER, MD

Provider ID: N/A

☞ 1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-24

SHUM, MERRILL, MD

Provider ID: N/A

☞ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-JUL-23

TSAI, JAMES, MD†

Provider ID: N/A

☞ 201 LAURSEN ST
HEMET, CA 92543
Effective as of 01-SEP-09

TSANG, WALTER, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

HOSPICE AND PALLIATIVE MEDICINE

TAECHARVONGPHAIROJ, VEERAVAT, MD

Provider ID: N/A

☞ 850 E LATHAM AVE STE
205
HEMET, CA 92543
Effective as of 01-MAR-24

HOSPITALIST MD/DO

TUN, TIN, MD†

Provider ID: N/A

☞ 1850 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-APR-23

INTERNAL MEDICINE

DHIMAN, DARSHAN, MD†

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23

DHIMAN, DARSHAN, MD†

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-23

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☞ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUN-17

MATHIAS, HERMAN, MD†

Provider ID: N/A

☞ 391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-DEC-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-SEP-23

PEARCE, DANIEL, DO

Provider ID: N/A

☞ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-OCT-23

RIVA, GREGORY, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

1275 E LATHAM AVE STE C
HEMET, CA 92543
Effective as of 01-APR-21

TAECHARVONGPHAIRAJ, VEERAVAT, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-23

INTERNAL MEDICINE GERIATRIC MEDICINE

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-AUG-95

INTERVENTIONAL CARDIOLOGY

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JAN-17

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE

104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

BISWAS, MIMI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

COX, JEREMY, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-JAN-19

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-14

MESSENGER, BRADLEY, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545
Teleservice
Effective as of 01-JAN-19

RASTOGI, ANISHA, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-13

SANGODKAR, SANDEEP, DO

Provider ID: N/A

3853 W STETSON AVE STE
104

C1. 網絡內提供者清單 專科護理醫師

HEMET, CA 92545
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

ARIAS-ALISHAHI, ELIZABETH, LCSW

Provider ID: N/A

📄 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JAN-21

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

GRANDISON, BROOKE, LCSW

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

GRANDISON, BROOKE, LCSW

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

HERSH, LINDSEY, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

HERSH, LINDSEY, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

HERSH, LINDSEY, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JONES, VALORIA, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

JONES, VALORIA, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

PIDDINGTON, CHRISTINE, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

PIDDINGTON, CHRISTINE, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

PIDDINGTON, CHRISTINE, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

PIDDINGTON, CHRISTINE, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

TABIL-GALAPON, BERNICE, LCSW

Provider ID: N/A

📄 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

📄 162 N SANTA FE ST
HEMET, CA 92543

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

POOR, PATRICK, MFT†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

POOR, PATRICK, MFT†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-DEC-22

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

☒ 1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

SHAIKH, ANWER, MD

Provider ID: N/A

☒ 1001 S STATE ST STE A
HEMET, CA 92543

Effective as of 01-APR-23

NEPHROLOGY

CHANG, DAVID, MD†

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE D
HEMET, CA 92543

Effective as of 01-NOV-06

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-23

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-18

DHIMAN, DARSHAN, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202

C1. 網絡內提供者清單 專科護理醫師

HEMET, CA 92545
Effective as of 01-MAR-21

DHIMAN, DARSHAN, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-APR-18

DHIMAN, DARSHAN, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-DEC-15

ISHAK, SALAM, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-20

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Teleservice
Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-FEB-21

NATH, ASHOK, MD†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-20

YAN, ERIC, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUN-23

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A
☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUN-22

OBSTETRICS /

C1. 網絡內提供者清單

專科護理醫師

GYNECOLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315
HEMET, CA 92544

Effective as of 01-FEB-17

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315
HEMET, CA 92544

Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

BONILLA, EDWARD, OT

Provider ID: N/A

☒ 3989 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-23

BONILLA, EDWARD, OT

Provider ID: N/A

☒ 3989 W STETSON AVE STE
105

HEMET, CA 92545

Effective as of 01-DEC-23

JENSEN, BROOKE, OT†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100

HEMET, CA 92545

Effective as of 01-MAY-21

JENSEN, BROOKE, OT†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
150

HEMET, CA 92545

Effective as of 01-JAN-20

OPHTHALMOLOGY

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-22

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JAN-22

CARLSON, JOHN, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-MAY-14

CHOW, JASON, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-OCT-22

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-21

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-18

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-NOV-08

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-MAR-98

JOHNSON, ROGER, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

JOSEPH, JEFFREY, MD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-19

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-JAN-11

LEE, JOHN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544

Effective as of 01-FEB-11

LEE, JOHN, MD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-14

LEE, JOHN, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

NAMBIAR, MARGARET, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-20

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14

PHILLIPS, BARRATT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09

SHELTON, RAYMOND, MD

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAY-23

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24

SORENSEN, ROBERT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

SORENSEN, ROBERT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22

SORENSEN, ROBERT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

SORENSEN, ROBERT, MD†

Provider ID: N/A

☒ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09

VIDOR, IRA, MD†

Provider ID: N/A

☒ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-19

WARNER, MICHAEL, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A

☒ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-SEP-09

OPTOMETRIST

C1. 網絡內提供者清單
專科護理醫師

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-11

FENNEMA, ERIC, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

FENNEMA, ERIC, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-10

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-18

MC CLEARY, DAVID, OD†

Provider ID: N/A

☞ 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

TADROS, JESSICA, OD†

Provider ID: N/A

☞ 2390 E FLORIDA AVE STE

C1. 網絡內提供者清單 專科護理醫師

207
HEMET, CA 92544
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

PEDIATRIC ENDOCRINOLOGY

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-OCT-10

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

LEE, JONATHAN KWANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

NIKACHINA, ANNA, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAY-21

PHYSICIANS ASSISTANT

ANDERSON, MATTHEW, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-21

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE

STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

CAGATAY, HARRIER, PA†

Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-20

CAGATAY, HARRIER, PA†

Provider ID: N/A

422 N SAN JACINTO ST STE
B-C
HEMET, CA 92543
Effective as of 01-AUG-20

CERALDE, ALAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-NOV-16

CERALDE, ALAN, PA†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

C1. 網絡內提供者清單 專科護理醫師

CERALDE, ALAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-16

CURTIS, DANIEL, PA†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-MAY-23

CURTIS, DANIEL, PA†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

DE CARO, ROBERT, PA†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†

Provider ID: N/A

☒ 4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-JUL-19

FELIX, FRANCISCO, PA

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-23

FELIX, FRANCISCO, PA

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

LANIER, JAME, PA†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

LANIER, JAME, PA†

Provider ID: N/A

☒ 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

MACHO, DANIELLA, PA†

Provider ID: N/A

☒ 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-FEB-17

MITCHELL, PAUL, PA

Provider ID: N/A

☒ 422 N SAN JACINTO ST STE B
HEMET, CA 92543
Effective as of 01-JUN-18

MITCHELL, PAUL, PA

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 101
HEMET, CA 92543
Effective as of 01-FEB-24

MOORE, PAMELA, PA†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 3889 W STETSON AVE STE
120
HEMET, CA 92545

Effective as of 01-DEC-17

QUEROL, CYRUS, PA

Provider ID: N/A

☐ 901 S STATE ST STE 100
HEMET, CA 92543

Effective as of 01-APR-24

RODDICK, JASON, PA

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-JUL-23

RODDICK, JASON, PA

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☐ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

SHORES, CLORINDA, PA†

Provider ID: N/A

☐ 255 N GILBERT ST BLDG B4
HEMET, CA 92543

Effective as of 01-OCT-17

SMITH, ANTHONY, PA†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SMITH, ANTHONY, PA†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

PODIATRIST

BRAHM, STEPHEN, DPM†

Provider ID: N/A

☐ 995 SAINT JOHN PL STE B
HEMET, CA 92543

Effective as of 01-MAY-17

HAAS, RICHARD, DPM†

Provider ID: N/A

☐ 760 W ACACIA AVE STE 117
HEMET, CA 92543

Effective as of 01-JUL-23

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☐ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☐ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☐ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PSYCHIATRY

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☐ 361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☒ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☒ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☒ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

☒ 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-23

KUNAM, SYAM, MD

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-24

KUNAM, SYAM, MD

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-24

PERSAUD, PRIA, MD

Provider ID: N/A

☒ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☒ 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-AUG-20

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUN-21

PSYCHOLOGIST

DUNN, JOSEPH, PhD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

DUNN, JOSEPH, PhD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

PULMONARY DISEASES

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-MAR-14

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-JUL-23

DHANANI, YURZUL, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-00

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-23

RADIATION ONCOLOGY

BELL, DAVID, MD†

Provider ID: N/A

430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-OCT-21

RHA, JANICE, MD†

Provider ID: N/A

430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-DEC-21

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

540 N JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-07

REGISTERED PHYSICAL THERAPIST

MONTERO, MARIA, PT

Provider ID: N/A

1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

MONTERO, MARIA, PT

Provider ID: N/A

1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

SMITH, DIANNE, PT†

Provider ID: N/A

1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-JUN-17

RHEUMATOLOGY

COLBURN, KEITH, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-JUL-23

RAMASWAMY,

DHARMARAJAN, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY GENERAL

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105

HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-FEB-24

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

IGWE, DANIEL, MD[†]

Provider ID: N/A

☐ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD[†]

Provider ID: N/A

☐ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD[†]

Provider ID: N/A

☐ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

JOHNSEN, HEGE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

MAC, OLIVIA, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-22

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-20

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

NOURI, SARVENAZ, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-NOV-22

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

☐ 4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-00

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

☐ 4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SHARMA, SURENDRA, MD[†]

Provider ID: N/A

☐ 4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

TIU, BRIAN, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

WANG, XIUJIE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-19

WANG, XIUJIE, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-21

SURGERY GENERAL VASCULAR

GORSKI, YARA, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

GORSKI, YARA, MD[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

☐ 3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

SURGERY HEAD

LE, SANG, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-JUL-15

SURGERY ORTHOPEDIC

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Teleservice

Effective as of 01-JUL-15

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Teleservice

Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Teleservice

Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100

HEMET, CA 92545

Teleservice

Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-JUL-15

BURTON, PAUL, DO†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAR-21

CAPUTO, ROY, MD

Provider ID: N/A

☐ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-APR-24

C1. 網絡內提供者清單

專科護理醫師

CHAN, JASON, MD

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

ELSISSY, PETER, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-16

ELSISSY, PETER, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GHAZAL, RONNY, MD

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GRAMES, BARRY, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-21

Effective as of 01-MAR-24

GRAMES, BARRY, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 200
HEMET, CA 92545

Effective as of 01-MAR-21

GRAMES, BARRY, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAY-16

GUSTAFSON, GEORGE, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-AUG-15

HUSAIN, ASGHAR, MD

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-24

LAROSE, CONNOR, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

LE, SANG, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-NOV-16

LE, SANG, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

LE, SANG, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JUL-15

MATIKO, JAMES, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-MAR-24

PANSE, MILIND, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543*

Effective as of 01-JUL-23

PATTON, DANIEL, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE 100
HEMET, CA 92545

Effective as of 01-JAN-20

PATTON, DANIEL, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

PATTON, DANIEL, MD†

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-21

POWERS, BRET, DO

Provider ID: N/A

3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

WONG, ANDREW, MD†

Provider ID: N/A

1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-NOV-09

UROLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

FAMILY PRACTICE

CHISUM, FAITH, MD

Provider ID: N/A

949 PALM AVE

IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-23

SUMMERS-DAY, COURTNEY, MD†

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-JUL-22

INTERNAL MEDICINE

RYAN, DANA, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-APR-23

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

DORSEY, KYLE, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

HERMAN, RACHEL, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

KARANDE, PRACHI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAY-23

VILLANUEVA, GIOVANNI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

CARR, WARNER, MD

Provider ID: N/A

15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

C1. 網絡內提供者清單 專科護理醫師

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240

IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

FRIEDMAN, BRUCE, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON

RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-17

ANESTHESIOLOGY

C1. 網絡內提供者清單 專科護理醫師

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-SEP-10

PERERA-THANGARATNAM, D, MD†

Provider ID: N/A

5 HOLLAND STE 101
IRVINE, CA 92618

Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-DEC-23

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-JUN-22

BESHAI, ALFRED, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-MAR-24

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-APR-11

HO, LARRY, MD

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-OCT-01

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

JILLANI, ASIF, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

MAHROU, REZA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

C1. 網絡內提供者清單 專科護理醫師

MITIKU, TEFERI, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-FEB-22

WARRIER, NIKHIL, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

CARDIOVASCULAR DISEASE

ASHTIANI, ALI, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

ASHTIANI, ALI, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

ASHTIANI, ALI, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-22

ASHTIANI, ALI, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-22

COHEN, STEPHEN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

COHEN, STEPHEN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

COHEN, STEPHEN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

DOAN VAN, NICOLAS, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE

STE 708

IRVINE, CA 92618

Effective as of 01-OCT-23

DOAN VAN, NICOLAS, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

ELSAIED, SARAH SABRY, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

ELSAIED, SARAH SABRY, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-APR-22

ELSAIED, SARAH SABRY, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

ESLAMI, BAHRAM, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

C1. 網絡內提供者清單
專科護理醫師

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

ESLAMI, BAHRAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

**ESLAMI-FARSANI, MAHMOUD,
MD†**

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

**ESLAMI-FARSANI, MAHMOUD,
MD†**

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

MELTZER, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

NGUYEN, HOANG, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

NGUYEN, HOANG, MD†

Provider ID: N/A

16300 SAND CANYON AVE

STE 708

IRVINE, CA 92618

Effective as of 01-DEC-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

NI, YU-MING, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-AUG-22

NI, YU-MING, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

PATEL, SANJIV, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

PATEL, SANJIV, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

WARRIER, NIKHIL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-DEC-21

C1. 網絡內提供者清單 專科護理醫師

WERTMAN, BRETT, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JENNIFER, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

WONG, JENNIFER, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

YALVAC, ETHAN, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-20

YALVAC, ETHAN, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

YALVAC, ETHAN, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-MAY-22

YANG, TAE, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JAN-22

YANG, TAE, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-OCT-23

CERTIFIED ACUPUNCTURIST

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-FEB-23

CHOI, JI, LAC†

Provider ID: N/A

☒ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAR-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-AUG-22

HONG, HEE KYUNG, LAC

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-AUG-22

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

Effective as of 01-MAY-21

KIM, CHEL, LAC

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-AUG-22

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-FEB-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-MAY-21

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-JUN-23

PARSI KANEMOTO, MARYAM, LAC[†]

Provider ID: N/A

☐ 22 ODYSSEY STE 165

IRVINE, CA 92618

Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

☐ 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618

Effective as of 01-MAY-23

CHOI, RANA, NP[†]

Provider ID: N/A

☐ 15775 LAGUNA CANYON
RD STE 210

C1. 網絡內提供者清單 專科護理醫師

IRVINE, CA 92618
Effective as of 01-SEP-19

DESAI, SONAM, NPF†

Provider ID: N/A
☑ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618*
Effective as of 01-OCT-22

FERRANTE, JADE, NP

Provider ID: N/A
☑ 8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-NOV-23

LIU, GRACE, NP

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

MANALESE, MARIA THERESA, NPF

Provider ID: N/A
☑ 16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618
Effective as of 01-APR-23

PARK, SE, NP

Provider ID: N/A
☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A
☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A
☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A
☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A
☑ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

SHIRKHANI, PARISA, NPF

Provider ID: N/A
☑ 8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-NOV-23

WU, JENNY, NP

Provider ID: N/A
☑ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

SAJADI, ALISA, CRNM

Provider ID: N/A

☑ 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-DEC-23

CHIROPRACTOR

KANG, KYUNG, DC

Provider ID: N/A
☑ 14875 JEFFREY RD STE 210
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A
☑ 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

WEDDLE, DIRK, DC

Provider ID: N/A
☑ 15375 BARRANCA PKWY

C1. 網絡內提供者清單 專科護理醫師

STE J104
IRVINE, CA 92618
Effective as of 01-JAN-18

CLINICAL NEUROPSYCHOLOGIST

BENNETT, LAUREN, PhD

Provider ID: N/A
16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*
Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A
16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*
Effective as of 01-OCT-22

HAMILTON, ANITA, PhD

Provider ID: N/A
300 SPECTRUM CENTER
DR STE 400
IRVINE, CA 92618
Effective as of 01-DEC-23

HAMILTON, ANITA, PhD

Provider ID: N/A
300 SPECTRUM CENTER
DR STE 400
IRVINE, CA 92618
Effective as of 01-DEC-23

DERMATOLOGY

BAGHERI, BITA, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

WANG, STEVEN, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUL-22

WANG, STEVEN, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUL-22

EMERGENCY MEDICINE

KADAKIA, AMAR, MD†

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

KARIMI, KAMBIZ, MD†

Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

ENDOCRINOLOGY METABOLISM DIABETES

CHAVEZ, BRIAN, MD†

Provider ID: N/A
22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-23

CHAVEZ, BRIAN, MD†

Provider ID: N/A
22 ODYSSEY STE 115
IRVINE, CA 92618
Teleservice
Effective as of 01-AUG-21

FARJOUDI, FARHAD, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 108
IRVINE, CA 92618
Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 108
IRVINE, CA 92618
Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 108
IRVINE, CA 92618
Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A
113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-JUN-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 220

C1. 網絡內提供者清單 專科護理醫師

IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-JUL-22

MARKMAN, LISA, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice
Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice
Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice
Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice
Effective as of 01-OCT-23

FAMILY PRACTICE

BURRIS, RYAN, MD

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201

IRVINE, CA 92618
Effective as of 01-FEB-23

BURRIS, RYAN, MD

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201

IRVINE, CA 92618
Effective as of 01-FEB-23

FAMILY PRACTICE

SPORTS MEDICINE

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-NOV-17

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-JAN-19

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY

STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618
Effective as of 01-MAY-12

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618
Effective as of 01-APR-11

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-16

BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

CHOI, DAVID, DO†
Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

HWANG, CAROLINE, MD
Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23

HWANG, CAROLINE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23

HWANG, CAROLINE, MD
Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

HWANG, CAROLINE, MD
Provider ID: N/A

500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23

KAUFMAN, DAVID, DO
Provider ID: N/A

18 ENDEAVOR STE 204
IRVINE, CA 92618
Effective as of 01-JUL-12

KUMAR, RASHMI, MD
Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

KUMAR, RASHMI, MD
Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, PAUL, MD
Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

OHARA, JUN ICHI, MD

Provider ID: N/A

22 ODYSSEY STE 170A
IRVINE, CA 92618

Effective as of 01-JUN-19

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-AUG-18

OMAN, MATTHEW, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-FEB-18

SINGH, HARDEEP, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-OCT-20

SINGH, HARDEEP, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-17

SINGH, HARDEEP, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

SINGH, HARDEEP, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-JUN-23

YAP, KONG PENG, MD†

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-14

YU, FANG, MD†

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-18

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

YU, FANG, MD†

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-JAN-23

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

YU, VICTOR, MD†

Provider ID: N/A

☐ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

YU, FANG, MD†

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618

Effective as of 01-OCT-23

GYNECOLOGIC ONCOLOGY

ABAID, LISA, MD†

Provider ID: N/A

☐ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-NOV-18

C1. 網絡內提供者清單 專科護理醫師

BECK, TIFFANY, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

BECK, TIFFANY, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

LEVINE, MONICA, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

LEVINE, MONICA, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE

STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

GOLDENSON, BENJAMIN, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-AUG-23

NANGIA, CHAITALI, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

NANGIA, CHAITALI, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

PANDIT, LALITA, MD[†]

Provider ID: N/A

☞ 16300 SAND CANYON AVE

STE 609
IRVINE, CA 92618
Effective as of 01-OCT-19

PANDIT, LALITA, MD[†]

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-21

SEERY, TARA, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

SEERY, TARA, MD[†]

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JAN-24

FONG, TSE LING, MD

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JAN-24

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618
Effective as of 01-AUG-20

SARAFIAN, FARJAD, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-APR-23

INTERNAL MEDICINE

AHDOOT, JACOB, MD†

Provider ID: N/A

☒ 15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

APPEL, RICHARD, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

BILLECI, BARTON, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 614

IRVINE, CA 92618*
Effective as of 01-OCT-15

CABRERA, JUAN, MD

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

CHENG, CATHY, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHENG, CATHY, MD

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHIEN, JOHN, MD†

Provider ID: N/A

☒ 16200 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-JAN-18

DANESH, HOUMAN, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618*
Effective as of 01-JAN-18

DAVIS, BARBARA, DO†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A

☒ 16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618
Effective as of 01-MAR-21

GEIGER, ERIK, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

GHOSH, SUBRATO, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

HUNG, JENNIFER, DO†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

LEE, RONALD, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

LU, CHRISTIAN, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MIRSAEID GHAZI, POURYA, MD†

Provider ID: N/A

☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

NGUYEN, VIET, DO†

Provider ID: N/A

☒ 11 TECHNOLOGY DR

C1. 網絡內提供者清單 專科護理醫師

IRVINE, CA 92618
Effective as of 01-JAN-18

NGUYEN, THUY, DO†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

PEREZ, FRANCISCO, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

SHAHAMIRI, SEAN, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

SHUNE, HONG, MD†

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-JAN-20

SYCHANGCO, PAUL, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

TAHERI, NIMA, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

YAP, MICHAEL, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

ZAHED, SHAHAB, MD†

Provider ID: N/A
☒ 11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

INTERVENTIONAL CARDIOLOGY

BERG, CHRISTOPHER, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

HOWELL, STACEY, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

KAZEMI, SEPIDEH, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 601
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

SCHACHTER, JESSICA, DO

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708

IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

WERTMAN, BRETT, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618

Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

YALVAC, ETHAN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

LICENSED CLINICAL SOCIAL WORKER

BOODMAN, SANDRA, LCSW

Provider ID: N/A

☐ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

☐ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

☐ 15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

**C1. 網絡內提供者清單
專科護理醫師**

***MARRIAGE FAMILY
THERAPIST***

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-JUL-23

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603

Effective as of 01-JUN-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350

IRVINE, CA 92618

Effective as of 01-DEC-23

***MATERNAL AND FETAL
MEDICINE***

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-21

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-SEP-16

DAY, ROBERT, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-SEP-16

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-JAN-20

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-JUN-19

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360

IRVINE, CA 92618

Effective as of 01-JAN-23

C1. 網絡內提供者清單 專科護理醫師

KFIR, MENASHE, MD[†]

Provider ID: N/A

☒ 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

MASAKI, DAMON, MD[†]

Provider ID: N/A

☒ 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618

Effective as of 01-DEC-19

MASAKI, DAMON, MD[†]

Provider ID: N/A

☒ 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-19

SHRIVASTAVA, VINEET, MD

Provider ID: N/A

☒ 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618

Effective as of 01-MAR-23

MEDICAL ONCOLOGY

BECERRA, CARLOS, MD

Provider ID: N/A

☒ 16105 SAND CANYON AVE STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

BECERRA, CARLOS, MD

Provider ID: N/A

☒ 16105 SAND CANYON AVE STE 230
IRVINE, CA 92618

Effective as of 01-MAR-23

HAMOUI, NAHID, MD[†]

Provider ID: N/A

☒ 16300 SAND CANYON AVE STE 604
IRVINE, CA 92618

Effective as of 01-SEP-13

KHAGI, SIMON, MD

Provider ID: N/A

☒ 16105 SAND CANYON AVE STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

KHAGI, SIMON, MD

Provider ID: N/A

☒ 16105 SAND CANYON AVE STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

PANDIT, LALITA, MD[†]

Provider ID: N/A

☒ 16300 SAND CANYON AVE STE 609
IRVINE, CA 92618

Effective as of 01-JAN-21

NEPHROLOGY

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-APR-11

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-14

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-18

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-MAY-12

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-JUN-18

AHDOOT, JACOB, MD[†]

Provider ID: N/A

☒ 15775 LAGUNA CANYON RD STE 220
IRVINE, CA 92618

Effective as of 01-OCT-23

JAMES, JOJI, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-AUG-23

C1. 網絡內提供者清單

專科護理醫師

MANSOURY, HADI, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

MESBAH, AZITA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-21

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUN-18

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUL-17

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON

RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-19

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-MAY-20

NEUROLOGY

CLEEREMANS, BRUCE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609

IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-14

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-APR-08

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-20

C1. 網絡內提供者清單 專科護理醫師

THAKKAR, SANDEEP, DO⁺

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO⁺

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO⁺

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-19

THAKKAR, SANDEEP, DO⁺

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-18

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

NEUROLOGY CHILD

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350

IRVINE, CA 92618

Effective as of 01-JUN-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD⁺

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-OCT-22

NUCLEAR MEDICINE

REDDY, RYAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

REDDY, RYAN, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618

Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JAN-18

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JUL-12

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-FEB-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-MAY-12

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-FEB-21

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-20

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-11

AHDOOT, MORRIS, MD[†]

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618

Effective as of 01-APR-20

BARR, JESSICA, DO

Provider ID: N/A

☞ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BARR, JESSICA, DO

Provider ID: N/A

☞ 22 ODYSSEY STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BUSH, MELISSA, MD[†]

Provider ID: N/A

☞ 15785 LAGUNA CANYON

RD STE 360

IRVINE, CA 92618

Effective as of 01-MAY-24

COUGH, HEIDI, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

DAVIS, STEPHANIE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

HASHEMI, EMAD, MD[†]

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-NOV-20

HASHEMI, EMAD, MD[†]

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-NOV-20

KONG, GRACE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

LEE, KATHERINE, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

LEE, KATHERINE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-JUN-23

LIN, JAMES, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618

Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-20

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-21

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PERKINS, KENDRA, DO†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-21

PETERS, AMY, DO

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-NOV-23

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-OCT-22

TANAMAI, VAYA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-MAY-20

YAO, GRACE, MD†

Provider ID: N/A

22 ODYSSEY STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

YAO, GRACE, MD†

Provider ID: N/A

22 ODYSSEY STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

OPHTHALMOLOGY

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JAN-17

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JAN-18

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-MAR-23

GE, NENGJIE, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JUL-12

GE, NENGJIE, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-OCT-23

GHIASI, ZAHRA, MD†

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 245
IRVINE, CA 92618
Effective as of 01-JAN-17

GWYNN, DAVID, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-MAR-23

LEE, ANDREW, MD

Provider ID: N/A

☞ 18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-MAY-23

LEE, JIMMY, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JUL-22

LEE, ANDREW, MD

Provider ID: N/A

☞ 18 ENDEAVOR STE 104
IRVINE, CA 92618
Effective as of 01-OCT-23

LEE, JIMMY, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

MARVASTI, AMIR, MD

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

MARVASTI, AMIR, MD

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*
Effective as of 01-JAN-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618
Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON

RD STE 201
IRVINE, CA 92618
Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

☞ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*
Effective as of 01-OCT-23

TAYANI, RAMIN, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-MAR-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-MAR-16

VAIDYA, NADEEM, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-FEB-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-JAN-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618
Effective as of 01-FEB-21

C1. 網絡內提供者清單 專科護理醫師

VAIDYA, NADEEM, MD[†]

Provider ID: N/A

☐ 16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-OCT-23

OPTOMETRIST

OWYANG, ASHLEY, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

OWYANG, ASHLEY, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

RUDE, LOREN, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

RUDE, LOREN, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

TRAN, STEPHANIE, OD

Provider ID: N/A

☐ 15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JAN-23

WANG, STEVEN, OD

Provider ID: N/A

☐ 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD[†]

Provider ID: N/A

☐ 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-OCT-23

WANG, MATTHEW, OD[†]

Provider ID: N/A

☐ 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-23

WANG, MATTHEW, OD[†]

Provider ID: N/A

☐ 22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-JAN-18

ORAL MAXILLOFACIAL SURGEON

KALANTARI, OUZHAN, DMD

Provider ID: N/A

☐ 114 PACIFICA STE 420
IRVINE, CA 92618

Effective as of 01-NOV-23

OTOLARYNGOLOGY

BALAKER, ASHLEY, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-JUN-19

BALAKER, ASHLEY, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-MAY-19

BALAKER, ASHLEY, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-OCT-22

BALAKER, ASHLEY, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-APR-23

BALAKER, ASHLEY, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-APR-23

BUEN, FLOYD, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD[†]

Provider ID: N/A

☐ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-DEC-20

BUEN, FLOYD, MD[†]

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

CHO, MICHAEL, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CHO, MICHAEL, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CROCKETT, DENNIS, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-18

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-23

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23

GE, NORMAN, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-OCT-12

LUU, QUANG, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16

MUNDI, JAGMEET, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16

PETTIS, ROBERT, MD†

Provider ID: N/A

☒ 16100 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-20

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-MAR-16

SUN, PAUL, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-FEB-16

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-AUG-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-AUG-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-JAN-14

ZUCKERMAN, KENNETH, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☞ 16300 SAND CANYON AVE
STE 704
IRVINE, CA 92618
Effective as of 01-JUL-12

PHYSICAL MEDICINE / REHABILITATION

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-DEC-14

LAI, KHANG, DO

Provider ID: N/A

☞ 15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-NOV-14

SEKO, KYLE, DO

Provider ID: N/A

☞ 9080 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

BOW, LINDA, PA[†]

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

CARR, OLIVIA, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CHRISTIE, CAMERON, PA

Provider ID: N/A

☞ 8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD[†]

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

☞ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

☞ 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

ROUGHLEY, MATTHEW, PA

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-DEC-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

STONE, MICHELLE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

C1. 網絡內提供者清單 專科護理醫師

STONE, MICHELLE, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

WONG, POLLYANNA, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WU, VANNA, PA

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

☞ 113 WATERWORKS WAY

STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-DEC-21

COYER, MICHAEL, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

COYER, MICHAEL, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

COYER, MICHAEL, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JAN-20

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE

STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

LIN, PARKSON, DPM

Provider ID: N/A

☞ 2 HUGHES STE 150
IRVINE, CA 92618
Effective as of 01-JAN-17

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-JUL-20

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☞ 113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-DEC-21

SOLAR, SARA, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-NOV-22

SOLAR, SARA, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-NOV-22

C1. 網絡內提供者清單
專科護理醫師

TIEN, AUDRIS, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-21

VINCENT, EBONIE, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JAN-21

YANG, DAVID, DPM

Provider ID: N/A

☞ 18 ENDEAVOR STE 206
IRVINE, CA 92618
Effective as of 01-JAN-23

YANG, DAVID, DPM

Provider ID: N/A

☞ 18 ENDEAVOR STE 206
IRVINE, CA 92618
Effective as of 01-OCT-23

YANG, ANDREW, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-DEC-20

PSYCHIATRY

RITTER, AARON, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22

SALO, CLINT, DO†

Provider ID: N/A

☞ 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17

SALO, CLINT, DO†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17

SALO, CLINT, DO†

Provider ID: N/A

2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

PSYCHOLOGIST

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE

C1. 網絡內提供者清單 專科護理醫師

350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A
☒ 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

PULMONARY DISEASES

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A
☒ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A
☒ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

GHAZARIAN, ZERON, MD†

Provider ID: N/A
☒ 16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618
Effective as of 01-MAR-21

GOZZO, YVETTE, MD

Provider ID: N/A
☒ 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

HARIANAWALA, SALIM, MD†

Provider ID: N/A
☒ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

HARIANAWALA, SALIM, MD†

Provider ID: N/A
☒ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-JUN-22

RADIATION ONCOLOGY

LIN, KEVIN, MD†

Provider ID: N/A

☒ 16105 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-JAN-21

LIN, KEVIN, MD†

Provider ID: N/A
☒ 16105 SAND CANYON AVE
STE 150
IRVINE, CA 92618
Effective as of 01-JAN-20

RADIOLOGY DIAGNOSTIC

ULANER, GARY, MD†

Provider ID: N/A
☒ 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

ULANER, GARY, MD†

Provider ID: N/A
☒ 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

SURGERY COLON SURGERY

MILANCHI, SIAMAK, MD†

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A
☒ 16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-21

SURGERY GENERAL

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-MAR-21

COLEMAN, COLLEEN, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-JAN-20

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-21

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-14

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-DEC-19

HURWITZ, MICHAEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-JAN-20

JENSEN, NATISHA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618

Effective as of 01-AUG-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618

Effective as of 01-OCT-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618

Effective as of 01-OCT-23

MACDONALD, HEATHER, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 160
IRVINE, CA 92618

Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618

Effective as of 01-JAN-18

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618

Effective as of 01-JAN-20

NISHANIAN, GARABED, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-NOV-15

SHAVER, JOHN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-NOV-19

SNYDER, LINCOLN, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-20

WOLF, RONALD, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-23

SURGERY GENERAL VASCULAR

NISHANIAN, GARABED, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE
STE 350
IRVINE, CA 92618
Effective as of 01-JAN-21

NISHANIAN, GARABED, MD†

Provider ID: N/A

☞ 16100 SAND CANYON AVE

STE 350

IRVINE, CA 92618

Effective as of 01-NOV-15

SURGERY NEUROLOGICAL

JANKOWSKI, PAWEL, MD

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

MEHTA, VIVEK, MD

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 300
IRVINE, CA 92618
Effective as of 01-APR-24

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE

STE 220

IRVINE, CA 92618

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21

OZGUR, BURAK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

OZGUR, BURAK, MD†

Provider ID: N/A

☞ 16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-23

SURGERY ORTHOPEDIC

ALEXANDER, GERALD, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511

C1. 網絡內提供者清單 專科護理醫師

IRVINE, CA 92618
Effective as of 01-JAN-21

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-MAR-18

ALEXANDER, GERALD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-MAR-18

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225

IRVINE, CA 92618

Effective as of 01-OCT-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240

IRVINE, CA 92618

Effective as of 01-OCT-23

ALI, RAED, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 225

IRVINE, CA 92618

Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240

IRVINE, CA 92618

Effective as of 01-JAN-23

ALI, RAED, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 240

IRVINE, CA 92618

Effective as of 01-JAN-19

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-23

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

AMINIAN, ARASH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

DEBOTTIS, DANIEL, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-OCT-23

DEBOTTIS, DANIEL, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-OCT-23

DINH, PAUL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-JAN-20

DUNPHY, TAYLOR, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 400

IRVINE, CA 92618

Effective as of 01-JAN-21

FARRELLY, ERIN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400

IRVINE, CA 92618

Effective as of 01-AUG-23

GITTINGS, DANIEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618

Effective as of 01-FEB-22

C1. 網絡內提供者清單 專科護理醫師

GITTINGS, DANIEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-FEB-22

GORDON, MICHAEL, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-JAN-21

GRAHAM, SCOTT, MD

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HUNTER, MICHAEL, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-OCT-22

HUNTER, MICHAEL, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-MAR-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-22

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-MAR-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-17

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JUL-23

KASSAM, HAFIZ, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-FEB-22

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-JAN-21

LIN, DARIUS, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 270B
IRVINE, CA 92618

Effective as of 01-JUN-17

MOLHO, DAVID, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-23

MONTGOMERY, ROBERT, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

MOSKOW, LONNIE, MD

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

NIETO, MICHAEL, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JUN-21

NIETO, MICHAEL, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511

C1. 網絡內提供者清單 專科護理醫師

IRVINE, CA 92618
Effective as of 01-JUN-21

NINH, CHRISTOPHER, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618
Effective as of 01-JAN-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618
Effective as of 01-OCT-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618
Effective as of 01-MAY-21

NINH, CHRISTOPHER, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618
Effective as of 01-DEC-23

NINH, CHRISTOPHER, MD†

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618
Effective as of 01-DEC-23

PARVARESH, KEVIN, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-DEC-20

PARVARESH, KEVIN, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-DEC-20

PATEL, AMAR, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

PATEL, AMAR, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

PYRKO, PETER, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

SCUDDAY, TRAVIS, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-SEP-18

SCUDDAY, TRAVIS, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-SEP-18

SCUDDAY, TRAVIS, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-JAN-21

TING, JAMES, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 400

IRVINE, CA 92618
Effective as of 01-JAN-21

VENEZIANO, CHRISTOPHER, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 210
IRVINE, CA 92618

Effective as of 01-SEP-23

WANG, WILLIAM, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 400

IRVINE, CA 92618
Effective as of 01-AUG-22

WANG, WILLIAM, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 400

IRVINE, CA 92618
Effective as of 01-AUG-22

WHITE, JON, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-DEC-12

WHITE, JON, MD†

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 511

IRVINE, CA 92618
Effective as of 01-AUG-18

WHITE, JON, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

16300 SAND CANYON AVE STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-23

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-NOV-22

ZHANG, JOANNE, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-NOV-22

SURGERY THORACIC

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-DEC-23

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

16105 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-APR-19

C1. 網絡內提供者清單 專科護理醫師

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

MARMUREANU, ALEXANDRU, MD

Provider ID: N/A

☐ 5 HOLLAND STE 101
IRVINE, CA 92618

Effective as of 01-NOV-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*

Effective as of 01-OCT-22

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JAN-21

C1. 網絡內提供者清單

專科護理醫師

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-20

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAY-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE

STE 200
IRVINE, CA 92618
Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-19

HO, TAMMY, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

KIM, MOSES, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

<p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-21</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-DEC-23</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-DEC-19</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-DEC-19</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-23</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618</p>	<p>Effective as of 01-OCT-22</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p> <p>MEAGLIA, JAMES, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-23</p> <p>NAKAMURA, LEAH, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-23</p> <p>NAKAMURA, LEAH, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-22</p> <p>NAKAMURA, LEAH, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-23</p> <p>NAKAMURA, LEAH, MD†</p>	<p>Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-APR-21</p> <p>NAKAMURA, LEAH, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-21</p> <p>NAKAMURA, LEAH, MD† Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p> <p>SHOURESHI, POONE, MD Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-23</p> <p>SHOURESHI, POONE, MD Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-23</p> <p>SHOURESHI, POONE, MD Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-23</p> <p>SHOURESHI, POONE, MD Provider ID: N/A</p> <p>☞ 16305 SAND CANYON AVE STE 200</p>
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C1. 網絡內提供者清單
專科護理醫師

IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE

STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

C1. 網絡內提供者清單

專科護理醫師

SPITZ, AARON, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SPITZ, AARON, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

SPITZ, AARON, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE

STE 200

IRVINE, CA 92618

Effective as of 01-DEC-19

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

SU, DANIEL, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TAKESITA, KEN, MD[†]

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-OCT-15

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

ZHAO, HANSON, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ALLERGY IMMUNOLOGY

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-22

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JUN-22

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

FILIPOVIC, MAYA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

GAYAM, SAJJAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

NARLA, VINOD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

ROY, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SUYDAM, STEVEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

TULLY, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

WANG, MICHELLE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

C1. 網絡內提供者清單 專科護理醫師

ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

MADHAV, SANDIP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-21

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

☒ 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

KING, JOHN, AuD

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

RUBY, CHARLES, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SPRIGGS, MEGHAN, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

TSANG, JOYCE, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WIAN, DEBORAH, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

Effective as of 01-JUL-21

ZETTNER, ERIKA, AuD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CARDIAC

ELECTROPHYSIOLOGY

COHEN, DAVID, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-MAY-20

COHEN, DAVID, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-SEP-21

HAMZEI, ALI, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

MENDENHALL, GEORGE, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-JAN-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-JUL-18

PATEL, JIGAR, DO†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 9850 GENESEE AVE STE
810

LA JOLLA, CA 92037
Effective as of 01-JAN-22

WHITWAM, WAYNE, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JAN-23

AVALOS, ROY, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

CARAZO, MATTHEW, MD†

Provider ID: N/A

☐ 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHARLAT, MARTIN, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, DAVID, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
430

LA JOLLA, CA 92037
Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
430

LA JOLLA, CA 92037
Effective as of 01-JUL-20

DAMANI, SAMIR, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
650

LA JOLLA, CA 92037
Effective as of 01-JUN-22

DURAN, EDWARD, MD

Provider ID: N/A

☐ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HONG, ERIC, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JAN-21

KARIMIAN, AMIR, MD

Provider ID: N/A

☐ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KEEN, WILLIAM, MD†

Provider ID: N/A

☐ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

KULHANEK, JAN, MD

Provider ID: N/A

☐ 9850 GENESEE AVE STE
780

LA JOLLA, CA 92037
Effective as of 01-JUL-23

KUMAR, KRIS, DO

Provider ID: N/A

☐ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
940

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
810

LA JOLLA, CA 92037
Effective as of 01-MAR-24

C1. 網絡內提供者清單 專科護理醫師

RAPEPORT, KEVIN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-MAR-16

RUSSO, ROBERT, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
350
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-DEC-22

SHAPIRO, HILARY, MD

Provider ID: N/A

☒ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☒ 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CERTIFIED

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

☒ 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

☒ 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

☒ 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

☒ 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CERTIFIED NURSE PRACTITIONER

ASHMAN, ELLEN, NP†

Provider ID: N/A

☒ 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

BIRD, JEREMY, NP

Provider ID: N/A

☒ 9300 CAMPUS POINT DR

C1. 網絡內提供者清單 專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP

Provider ID: N/A
7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNER, PAMELA, NP

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNER, PAMELA, NP

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

CZYPULL, MONICA, NP

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

DE DIOS, SARAH, NP

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISCOLL, KARRIE, NP†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

EVANS, ELISABETH, NP

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

GIOVANNETTI, ERIN, NP†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOSHEN, KIRSTEN, NP†

Provider ID: N/A
9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOSHEN, KIRSTEN, NP†

Provider ID: N/A
9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HADINGER, JANE, NP

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

HALPERN, DAVID, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JAN-21

HANNA, LINDSAY, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

HEURING, JULIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

JENKINS, ERIN, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

JONES, CHRISTA, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-21

JONES, LAILA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-JUN-23

JORJADZE, KETEVAN, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

KHUAT, LIEN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

LEE, MINDY, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

MATTERA, BETH, NPF

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

MATTHESS, JANETTE, NP†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-FEB-22

MATTHESS, JANETTE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCCALLION, DANIELLE, NP†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-OCT-21

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCPHERSON, SAMANTHA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

MICHAEL, NICOLE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

MICK, SHARON, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-21

MORENO, MANUEL, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

PETREK, MEAGAN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

RENFROE, ILANA, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SALINAS, NIECEL, NP†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SETIAWAN, EUGENIE, NPF†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

SILVESTRI, NICOLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

SOLOMON, AMANDA, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SRILASAK, MICHELE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9834 GENESEE AVE STE
416
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-24

TRAN, TRAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TRAN, TRAN, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-23

TRUJILLO, DALE, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

Effective as of 01-APR-21

VIERRA, ERIN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WARD, MICHAEL, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

WEIDNER, ANNE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

YEO, ALEXANDRIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

ZUNIGA, VANIA, NP†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CERTIFIED REGISTERED NURSE ANESTHETIST

AMADOR, LINDSAY, CRNA†

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

COLE, JASON, CRNA†

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DULAY, JOTI, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

EVANS, CATHERINE, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

☐ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

☐ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

POLIKOWSKI, SAMANTHA, CRNA†

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SOTO, GILBERTO, CRNA†

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CERTIFIED REGISTERED

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NURSE MIDWIFE

CHOI, NATHALIE, CRNM

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CORRY, ANDREA, CRNM

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CHIROPRACTOR

BERKOFF, GREGORY, DC

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CLINICAL

NEUROPSYCHOLOGIST

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KAUP, ALLISON, PhD†

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DERMATOLOGY

CHANG, TIMOTHY, MD†

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NASH GOELITZ, ALYSSA, MD†

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EMERGENCY MEDICINE

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CHEN, ALICE, MD†

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GALUST, HENRIK, MD

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HERNANDEZ, CRISTINA, MD†

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PARK, JAY, MD†

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SELTZER, JUSTIN, MD†

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SMITH, CASEY, MD

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SUPAT, BENJAMIN, MD

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YU, ELAINE, DO

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ENDOCRINOLOGY

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FAMILY PRACTICE

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GASTROENTEROLOGY

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GENETICS MEDICAL

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GYNECOLOGIC ONCOLOGY

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GYNECOLOGY

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HEMATOLOGY / ONCOLOGY

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SINCLAIR, JAMES, MD†

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SINCLAIR, JAMES, MD†

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WALLACH, SABINA, MD†

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HOSPICE AND PALLIATIVE MEDICINE

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SARWAR, NADIA, MD†

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HOSPITALIST MD/DO

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COFFLER, ELIANE, MD

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DJEKIC, KRISTINA, DO†

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DOUGLAS, JASON, MD

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FIRESTEIN, CATHERINE, MD†

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HAMMOND, CHARLES, MD†

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PAPP, STEPHAN, MD

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SCHUETZ, HESTON, MD

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SHINDO, YURI, MD†

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TONG, ALEXANDER, MD

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WILLIAMS, BRANDON, MD†

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YASSIN, HAZEM, MD

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INFECTIOUS DISEASE

BARTHEL, ROBERT, MD†

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KUPPALLI, KRUTIKA, MD

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MILLER, HOWARD, MD

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TANG, MICHAEL, MD

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INTERNAL MEDICINE

BORTZ, DAVID, MD†

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GADIYARAM, VARUNA, MD

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KATSNELSON, MARCELLA, DO

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LAM, PAMELA, DO†

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LAM, PAMELA, DO†

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LEWIS, GREG, MD†

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LEWIS, GREG, MD†

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LIU, ANDREW, MD

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LIU, ANDREW, MD

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LUGO, GUSTAVO, MD†

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Effective as of 01-AUG-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-22

TRAN, PHI, DO†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TRAN, PHI, DO†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRIVEDI, NAYANA MOHAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRIVEDI, MEHUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JONES, DANIEL, MD†
Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SULLIVAN, LAUREN, MD
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†
Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-SEP-15

AL KHIAMI, BELAL, MD†
Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CRUZ RODRIGUEZ, JOSE, MD
Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DAMANI, SAMIR, MD†
Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-NOV-23

GOVEA, ALAYN, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

RAPEPORT, KEVIN, MD†
Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†
Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-NOV-20

LICENSED CLINICAL SOCIAL WORKER

ELLEGE, LINDSAY, LCSW
Provider ID: N/A

8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
Effective as of 01-JUL-23

WISHNEK, HANNAH, LCSW†
Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MARRIAGE FAMILY THERAPIST

POZUN, CARA, MFT
Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI, MD
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEDICAL ONCOLOGY

BANERJEE, PUSHPENDU, MD†
Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-18

FLORES, EDNA, MD†
Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JUN-18

FLORES, EDNA, MD†
Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

NEPHROLOGY

AL-DAHMAN, ZAID, MD
Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CRUZ WHITLEY, JESSICA, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DAVIS, JASON, MD

Provider ID: N/A

☐ 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

LAKHERA, YOGITA, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-22

NAMAZY, DAVID, MD

Provider ID: N/A

☐ 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-JUN-23

RANA, SHAUNAK, MD†

Provider ID: N/A

☐ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*
Effective as of 01-NOV-21

STEER, DYLAN, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-15

STEER, DYLAN, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-FEB-05

STEER, DYLAN, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

STEER, DYLAN, MD†

Provider ID: N/A

☐ 9834 GENESEE AVE STE

312

LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-DEC-17

TOROSIAN, KARO, DO†

Provider ID: N/A

☐ 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-20

ZHONG, YAN, MD†

Provider ID: N/A

☐ 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAR-22

NEUROLOGY

ANSARI, HOSSEIN, MD†

Provider ID: N/A

☐ 4180 LA JOLLA VILLAGE
DR STE 240

C1. 網絡內提供者清單 專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOUDRY, BILAL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

DROKER, BRIAN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Teleservice

Effective as of 01-APR-24

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

GUPTA, VISHAL, DO

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

HAAS, RICHARD, MD†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037
Effective as of 01-OCT-21

KARANJIA, NAVAZ, MD†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-FEB-22

KOCHARIAN, NAIRA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
340

LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Teleservice

Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Teleservice

Effective as of 01-FEB-21

OH, IRENE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Effective as of 01-MAR-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037
Effective as of 01-OCT-21

SADOFF, MARK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Effective as of 01-FEB-21

SCHIM, JACK, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

C1. 網絡內提供者清單 專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
530

LA JOLLA, CA 92037
Effective as of 01-SEP-22

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
470

LA JOLLA, CA 92037
Effective as of 01-FEB-16

WIEGAND, SARAH, DO†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

KIPPER, MICHAEL, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-OCT-21

BONDRE, IOANA, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037
Effective as of 01-NOV-21

DELCORE, LAURA, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-MAY-21

C1. 網絡內提供者清單 專科護理醫師

HILL, KAITLYN, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KURTULUS, MEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

MACKAY, GILLIAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PICKETT, CHARLOTTE, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR

LA JOLLA, CA 92037
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

SPRING ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SPRING ROBINSON,

CHANDRA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-23

THOMSON, SAMANTHA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-OCT-21

OCCUPATIONAL

THERAPIST

MUNCADA, CAESAR, OT†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

C1. 網絡內提供者清單 專科護理醫師

BINDER, NICHOLAS, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-23

BOLO, KYLE, MD

Provider ID: N/A

📄 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

CHIU, STEPHAN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CHOPLIN, NEIL, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

CULOTTA, ANTHONY, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CULOTTA, ANTHONY, MD†

Provider ID: N/A

📄 9834 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

ESLANI, MEDI, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📄 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

FISH, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

GARFF, KEVIN, MD

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HENNEIN, LAUREN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

HUANG, ALEX, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-APR-22

JIN, MAN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

JIN, MAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LANG, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-JUL-23

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
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LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

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9850 GENESEE AVE STE

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310
LA JOLLA, CA 92037
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PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
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PERRY, ARTHUR, MD

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9850 GENESEE AVE STE
310
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PRATT, STEVEN, MD†

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9850 GENESEE AVE STE
310
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PRATT, STEVEN, MD†

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9850 GENESEE AVE STE
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PRATT, STEVEN, MD†

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9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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PUIG LLANO, MANUEL, MD

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9415 CAMPUS POINT DR
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RAHMATNEJAD, KAMRAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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RAHMATNEJAD, KAMRAN, MD

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9415 CAMPUS POINT DR
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ROESKE, RICHMOND, MD

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9834 GENESEE AVE STE
200
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SAMUEL, MICHAEL, MD†

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9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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SATTERFIELD, KELLIE, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
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SATTERFIELD, KELLIE, MD

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SCHONBACH, ETIENNE, MD†

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9415 CAMPUS POINT DR
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SHEILS, CATHERINE, MD

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9415 CAMPUS POINT DR
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SHEILS, CATHERINE, MD

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SHOJI, MARISSA, MD

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9350 CAMPUS POINT DR
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SHOJI, MARISSA, MD

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9415 CAMPUS POINT DR
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SONG, DELU, MD†

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SUK, KEVIN, MD

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WESTEREN, ALAN, MD

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6529 LA JOLLA BLVD
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ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
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Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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ZHAO, TAILUN, MD

Provider ID: N/A

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310
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OPTOMETRIST

GARDNER, KRISTA, OD†

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8950 VILLA LA JOLLA DR
STE C130

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Teleservice

Effective as of 01-MAY-22

HOO, PAMELA, OD†

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9415 CAMPUS POINT DR
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JOMOC, CAITLIN, OD

Provider ID: N/A

9415 CAMPUS POINT DR
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JOMOC, CAITLIN, OD

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9350 CAMPUS POINT DR
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JULAZADEH, SARA, OD

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9834 GENESEE AVE STE
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KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
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KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
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KIM, PHILIP, OD†

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9415 CAMPUS POINT DR
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MCCLEAN, ESMERALDA, OD†

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OTOLARYNGOLOGY

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BRUMUND, KEVIN, MD

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BRUMUND, KEVIN, MD

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CALIFANO, JOSEPH, MD

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CALIFANO, JOSEPH, MD

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☒ 9350 CAMPUS POINT DR

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☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

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CHANG, ANGELA, MD†

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CHANG, ANGELA, MD†

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Effective as of 01-JUL-20

CHANG, ANGELA, MD†

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COFFEY, CHARLES, MD

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☒ 9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

☒ 9350 CAMPUS POINT DR
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COFFEY, CHARLES, MD

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☒ 3855 HEALTH SCIENCES
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COFFEY, CHARLES, MD

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
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DECONDE, ADAM, MD

Provider ID: N/A

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DECONDE, ADAM, MD†

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☒ 3855 HEALTH SCIENCES
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DECONDE, ADAM, MD†

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☒ 9350 CAMPUS POINT DR
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DECONDE, ADAM, MD

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☒ 9300 CAMPUS POINT DR
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FRIEDMAN, RICK, MD

Provider ID: N/A

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FRIEDMAN, RICK, MD

Provider ID: N/A

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FRIEDMAN, RICK, MD

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FRIEDMAN, RICK, MD

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3855 HEALTH SCIENCES
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GILANI, SAPIDEH, MD

Provider ID: N/A

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GILANI, SAPIDEH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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GILANI, SAPIDEH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
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GILANI, SAPIDEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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GREENE, JACQUELINE, MD

Provider ID: N/A

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Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

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Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GUO, THERESA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
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Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9400 CAMPUS POINT DR
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Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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HUGHES, CHARLOTTE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
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Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

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JANSEN, CORNELIUS, MD

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3855 HEALTH SCIENCES
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JANSEN, CORNELIUS, MD[†]

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9350 CAMPUS POINT DR
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JANSEN, CORNELIUS, MD

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JANSEN, CORNELIUS, MD

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KARI, ELINA, MD

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KARI, ELINA, MD[†]

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9350 CAMPUS POINT DR
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KARI, ELINA, MD

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KARI, ELINA, MD

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MAGIT, ANTHONY, MD

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3855 HEALTH SCIENCES
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MAGIT, ANTHONY, MD

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MATSUOKA, AKIHIRO, MD

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MATSUOKA, AKIHIRO, MD

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NGUYEN, QUYEN, MD

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9400 CAMPUS POINT DR
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NGUYEN, QUYEN, MD†

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NGUYEN, QUYEN, MD

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REUTHER, MARSHA, MD†

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REUTHER, MARSHA, MD†

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SCHALCH LEPE, PAUL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
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SCHALCH LEPE, PAUL, MD†

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SCHALCH LEPE, PAUL, MD

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3855 HEALTH SCIENCES
DR

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Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

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**VAHABZADEH-HAGH,
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WATSON, DEBORAH, MD†

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WEISSBROD, PHILIP, MD

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9300 CAMPUS POINT DR

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WEISSBROD, PHILIP, MD†

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WOO, LINDA, MD†

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YAN, CAROL, MD

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YAN, CAROL, MD

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PATHOLOGY ANATOMIC CLINICAL

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PEDIATRIC

PULMONOLOGY

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☒ 3252 HOLIDAY CT STE 113
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PEDIATRIC RADIOLOGY

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EVORA, DARRYL, MD†

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KONING, JEFFREY, MD†

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☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

PUGMIRE, BRIAN, MD†

Provider ID: N/A
☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

PEDIATRICS

GROBMAN, LILLIAN, MD†

Provider ID: N/A
☒ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†

Provider ID: N/A
☒ 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PHYSICAL MEDICINE / REHABILITATION

MADHAV, SANDIP, MD†

Provider ID: N/A
☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA
Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JUN-23

ABRAHAMSEN, KELSEY, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

ALBRIGHT, KELSEY, PA†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

ALLERS, JENNA, PA
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

ARMEEN, GARY, PA†
Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BAKER, LINDZEE, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-NOV-22

BECKER, JANTIMA, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

CANDARE, VANESSA, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-FEB-21

CASO, STEPHEN, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

FELLION, LAUREN, PA
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

FLORENCE, BRYNA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

FREY, LAUREN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-22

GALDAMEZ, ANDREA, PA†
Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

GOTTESFELD, STEVEN, PA
Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-DEC-23

GOTTESFELD, STEVEN, PA
Provider ID: N/A

9850 GENESEE AVE STE
650
LA JOLLA, CA 92037
Effective as of 01-MAR-24

HANSEN, CHRISTINA, PA
Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

HIGGINS, JOSHUA, PA†
Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†
Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-FEB-22

MARTIN, HALEY, PA

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MATTIOLI, TAYLOR, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MEGALI, NICOLE, PA

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MORDEN, JACQUELINE, PA†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MOTT, KRISTEN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-22

OKADA, MICHELLE, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

OKADA, MICHELLE, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

PAAMONI, ARIELLE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21

C1. 網絡內提供者清單 專科護理醫師

RAHIM, ARIANNA, PA

Provider ID: N/A

📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-OCT-23

SAIKHON, TALIA, PA†

Provider ID: N/A

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-SEP-22

SAINT, MEAGHAN, PA

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SAUNDERS, SARA, PA†

Provider ID: N/A

📍 9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

SHARAF, KAREEM, PA†

Provider ID: N/A

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

SNOWDEN, KELLY, PA

Provider ID: N/A

📍 7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

SPEH, BRIAN, PA

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAR-24

SZABO, HAYLIE, PA

Provider ID: N/A

📍 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-22

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

WRITER, NICOLE, PA

Provider ID: N/A

📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*

Effective as of 01-FEB-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

📍 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-OCT-19

BERENTER, JAY, DPM†

Provider ID: N/A

📍 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JAN-21

BERGER, COLBY, DPM

Provider ID: N/A

📍 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

📍 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-SEP-21

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037
Effective as of 01-MAR-22

PREVENTATIVE MEDICINE GENERAL

STERN, ANNA, MD

Provider ID: N/A

☞ 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

PSYCHIATRY

BRAR, SIMERJEET, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

BRAR, SIMERJEET, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

FINN, DAPHNA, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR

STE C101
LA JOLLA, CA 92037
Effective as of 01-SEP-21

FINN, DAPHNA, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-SEP-21

JOSHI, YASH, MD

Provider ID: N/A

☞ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

☞ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

☞ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

☞ 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☞ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

LEDBETTER, ALEX, DO

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

☞ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LIU, FRED, MD†

Provider ID: N/A

☞ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

LIU, FRED, MD†

Provider ID: N/A

☞ 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

C1. 網絡內提供者清單 專科護理醫師

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217

LA JOLLA, CA 92037
Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SCHNEEBERGER, ANDRES, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

TARVER, LESLIE, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

REGO-KEARNEY, JENNIFER, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD[†]

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BAILIS, JESSICA, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CRANDAL, BRENT, PhD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CRANDAL, BRENT, PhD[†]

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CUSACK, ANNE, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KAUP, ALLISON, PhD[†]

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD[†]

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

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530
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Teleservice

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MINASSIAN, ARPI, PhD[†]

Provider ID: N/A

9300 CAMPUS POINT DR
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Effective as of 01-NOV-21

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REED, KRISTIE, PhD

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PUBLIC HEALTH

PREVENTATIVE MEDICINE

PERLMAN, MONICA, MD

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PULMONARY DISEASES

BAILEY, JACOB, MD

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CORATE, LALAINE, MD[†]

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CORATE, LALAINE, MD[†]

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**RAKOW-PENNER, REBECCA,
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SPENGLER, NATHAN, MD
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STEINBERGER, AMANDA, DO
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410
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**TAMAYO-MURILLO,
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THOMPSON, COLE, MD
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YORK, VINCENT, MD†

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REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD

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REGISTERED PHYSICAL THERAPIST

CAPONETTI, ELLIOTT, PT

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FERRER, MIRON, PT

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GILLILAND, TYLER, PT

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HOUSELY, ALEXIS, PT

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SHARP, SIMPSON, PT

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TROYER, CORY, PT

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RHEUMATOLOGY

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📍 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A
📍 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

C1. 網絡內提供者清單 專科護理醫師

HORGAN, SANTIAGO, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

MORELL, MICHAEL, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MORELL, MICHAEL, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MORELL, MICHAEL, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

OLSON, CHERYL, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-APR-17

OLSON, CHERYL, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

📄 4150 REGENTS PARK ROW

STE 345
LA JOLLA, CA 92037
Effective as of 01-JUL-20

SHAPER, EMANUEL, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SHAPER, EMANUEL, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SHERMAN, MARK, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

LUCAS, SARAH, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SURGERY HAND

BROWN, RICHARD, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAY-18

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

SURGERY NEUROLOGICAL

MURTHY, NIKHIL, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

MURTHY, NIKHIL, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

C1. 網絡內提供者清單
專科護理醫師

OSTRUP, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
770

LA JOLLA, CA 92037

Effective as of 01-JAN-13

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037*

Effective as of 01-MAR-24

BLAIS, MICAH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

BLAIS, MICAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUL-23

BUKATA, SUSAN, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAR-21

CHOI, JIHOON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-SEP-21

CHOI, JIHOON, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037*

Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Effective as of 01-MAR-24

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

HACKLEY, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210

LA JOLLA, CA 92037

Effective as of 01-JAN-21

KANE, NORMAN, MD

Provider ID: N/A

9834 GENESEE AVE STE

228

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

MARSHALL, STUART, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037

Effective as of 01-NOV-18

MCKNIGHT, BRADEN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

9850 GENESEE AVE STE
210

LA JOLLA, CA 92037

Effective as of 01-JAN-21

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*

Teleservice

Effective as of 01-MAR-24

SWENSON, FRANK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Effective as of 01-JAN-21

TAYLOR, MARIO, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

TAYLOR, MARIO, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

THUNDER, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Effective as of 01-JAN-21

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SURGERY PLASTIC

GOSMAN, AMANDA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037

Effective as of 01-SEP-15

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037

Effective as of 01-MAR-16

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037*

Effective as of 01-JUL-22

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037

Effective as of 01-JUL-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300
LA JOLLA, CA 92037

Effective as of 01-JAN-21

UMANSKY, JEFFREY, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 260
LA JOLLA, CA 92037*

Effective as of 01-JAN-14

SURGERY THORACIC

BARADARIAN, SAM, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-NOV-17

BARADARIAN, SAM, MD

Provider ID: N/A

9898 GENESEE AVE FL 3
LA JOLLA, CA 92037
Effective as of 01-JAN-24

HUDSON, JESSICA, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MOASIS, GHASSAN, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-MAY-17

TYNER, JOHN, MD†

Provider ID: N/A

10666 N TORREY PINES RD
STE 209
LA JOLLA, CA 92037
Effective as of 01-SEP-20

TYNER, JOHN, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-SEP-15

WANG, WILLIAM, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-SEP-15

ZANDER, ASHLEY, DO†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-22

UROLOGY

ANGER, JENNIFER, MD†

Provider ID: N/A

9400 CAMPUS POINT DR

LA JOLLA, CA 92093
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
630
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-21

DATO, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JUL-22

NAITOH, JOHN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-NOV-21

NAITOH, JOHN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-NOV-98

NAITOH, JOHN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-SEP-22

NAITOH, JOHN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-19

NGUYEN, HUNG, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-21

PE, MARK-RALLY, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SHEETZ, TYLER, MD

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SIMON, SCOTT, MD

Provider ID: N/A

☒ 9834 GENESEE AVE STE
224
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

☒ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

YUH, BENJAMIN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-23

YUH, BENJAMIN, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Effective as of 01-SEP-22

ANESTHESIOLOGY

CHIEN, SHELBY, MD†

Provider ID: N/A

☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☒ 7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☒ 7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-23

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☒ 7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-FEB-16

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-APR-24

COHEN, ZACHARY, MD

Provider ID: N/A

☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-FEB-24

LEE, INSUN, MD†

Provider ID: N/A

☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-24

VERDOLIN, MICHAEL, MD

Provider ID: N/A

☒ 7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-MAR-22

AUDIOLOGIST

HORNER, HEATHER, AuD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942

Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942

Effective as of 01-JAN-21

SHASKY, GARY, AuD

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942

Effective as of 01-FEB-24

CARDIAC ELECTROPHYSIOLOGY

DAWOOD, FARAH, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-DEC-20

CARDIOVASCULAR DISEASE

AZIMI, NASSIR, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942

Effective as of 01-JAN-21

AZIMI, NASSIR, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942

Effective as of 01-SEP-22

BELOTT, PETER, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 305
LA MESA, CA 91942

Effective as of 01-APR-17

DAWOOD, FARAH, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-AUG-21

KIM, JAMES, MD

Provider ID: N/A

☒ 5358 JACKSON DR STE 1

C1. 網絡內提供者清單 專科護理醫師

LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-23

KIM, JAMES, MD

Provider ID: N/A
☒ 5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-23

KOTHA, PURUSHOTHAM, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-JAN-21

SHEREV, DIMITRI, MD

Provider ID: N/A
☒ 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A
☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

HALE, EMILY, NPF

Provider ID: N/A
☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942
Teleservice
Effective as of 01-MAY-23

MCCALLION, DANIELLE, NP

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MEGERT, SONYA, NP†

Provider ID: N/A
☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A
☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

WOLF, ELI, NP

Provider ID: N/A
☒ 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
Effective as of 01-OCT-23

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A
☒ 5565 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-SEP-22

HEMATOLOGY / ONCOLOGY

BATRA, REEMA, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Effective as of 01-JAN-14

BATRA, REEMA, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

BODKIN, DAVID, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Effective as of 01-FEB-18

ZU, KAI, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Teleservice
Effective as of 01-JAN-14

ZU, KAI, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

INFECTIOUS DISEASE

HADDAD, FADI, MD

Provider ID: N/A

☒ 8860 CENTER DR STE 320
LA MESA, CA 91942

Effective as of 01-JUN-23

MIRADI, MOHAMMED, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 1 STE 211
LA MESA, CA 91942

Effective as of 01-SEP-22

MIRADI, MOHAMMED, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 1 STE 211
LA MESA, CA 91942

Effective as of 01-APR-15

INTERNAL MEDICINE

FADDA, GEORGE, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-14

FERNANDEZ, GENARO, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304

LA MESA, CA 91942

Effective as of 01-SEP-22

KOTHA, ROSHAN, MD†

Provider ID: N/A

☒ 8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-SEP-15

LEININGER, DANIEL, DO†

Provider ID: N/A

☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

LIU, ANDREW, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-23

MOOLANI, UJJALA, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-23

POKALA, SATHYA, MD†

Provider ID: N/A

☒ 8860 CENTER DR STE 240
LA MESA, CA 91942

Effective as of 01-JAN-14

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

FERNANDEZ, GENARO, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-DEC-20

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-JAN-19

NAGHI, JESSE, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-24

NAGHI, JESSE, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JUL-22

NGUYEN, BRYANT, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 304
LA MESA, CA 91942

Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 405
LA MESA, CA 91942

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 405

C1. 網絡內提供者清單 專科護理醫師

LA MESA, CA 91942
Effective as of 01-SEP-22

YELLEN, LAURENCE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

DO, LUAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

DO, LUAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-14

DO, LUAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

FADDA, GEORGE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

FADDA, GEORGE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FARAVARDEH, ARMAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-14

LEININGER, DANIEL, DO†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-22

LEININGER, DANIEL, DO†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-OCT-22

LEININGER, DANIEL, DO†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

LEININGER, DANIEL, DO†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

MILLER, LUCY, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

MILLER, LUCY, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-APR-15

C1. 網絡內提供者清單 專科護理醫師

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAR-24

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-15

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-14

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942*
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

DAVIS, TRACIE, MD†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-APR-21

PAPA, RHETT, DO†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-APR-21

OCCUPATIONAL

THERAPIST

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

PORTER, EILEEN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

SHIH, LYNN, OT

Provider ID: N/A

4700 SPRING ST STE 180

C1. 網絡內提供者清單 專科護理醫師

LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT

Provider ID: N/A
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Effective as of 01-DEC-23

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

CARRABY, ARNETT, MD†

Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942

Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD

Provider ID: N/A
7339 EL CAJON BLVD STE
K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHIU, STEPHAN, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

CHIU, STEPHAN, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-23

DELENGOCKY, TAYSON, DO†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

☐ 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

FISH, STEVEN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-22

FISH, STEVEN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR BLDG 2 STE 3
LA MESA, CA 91942
Effective as of 01-JAN-22

FISH, STEVEN, MD

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-JAN-21

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-JAN-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-MAY-22

HSU, CHRISTOPHER, MD†
 Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-22

HUDSON, HENRY, MD†
 Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-APR-23

HUDSON, HENRY, MD†
 Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-23

HUDSON, HENRY, MD†
 Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-MAY-21

HUDSON, HENRY, MD†
 Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-23

HUDSON, HENRY, MD†
 Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942

Effective as of 01-MAR-23

HUDSON, HENRY, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-MAR-22

HUDSON, HENRY, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942

Effective as of 01-SEP-22

KATZMAN, BARRY, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-MAR-22

KATZMAN, BARRY, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

☐ 8851 CENTER DR STE 406
 LA MESA, CA 91942

Effective as of 01-JUL-22

MANI, MAJID, MD†

Provider ID: N/A

☐ 8851 CENTER DR STE 406
 LA MESA, CA 91942

Effective as of 01-SEP-22

MANI, NASRIN, MD†

Provider ID: N/A

☐ 8851 CENTER DR STE 406

LA MESA, CA 91942

Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942

Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-MAR-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR BLDG 2 STE 3
 LA MESA, CA 91942

Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

☐ 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-APR-23

**MORRISON-REYES, JOSHUA,
 MD†**

Provider ID: N/A

☐ 5565 GROSSMONT
 CENTER DR BLDG 2 STE 3
 LA MESA, CA 91942

Effective as of 01-APR-22

C1. 網絡內提供者清單
專科護理醫師

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551 BLDG
3
LA MESA, CA 91942
Effective as of 01-SEP-22

NAJAFI, DAVID, MD

Provider ID: N/A

8262 UNIVERSITY AVE
LA MESA, CA 91942
Effective as of 01-JAN-23

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406

LA MESA, CA 91942
Effective as of 01-SEP-22

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

PATEL, GITANE, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-AUG-20

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23

PERRY, ARTHUR, MD

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-DEC-23

PRABHU, SUJATA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942

Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

PRATT, STEVEN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JUL-22

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAR-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-FEB-21

SASSANI, PATRICK, MD

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-FEB-24

SCHER, BARRY, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-AUG-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-JAN-24

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT

C1. 網絡內提供者清單 專科護理醫師

CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE
J/K
LA MESA, CA 91942
Effective as of 01-DEC-22

KHALIL, VADY, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-NOV-22

TONNU, ANH, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

VINH, JOHN, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

VINH, JOHN, OD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JAN-21

VINH, JOHN, OD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-20

ZVANUT, DONALD, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

ZVANUT, DONALD, OD†

Provider ID: N/A
7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-AUG-22

OTOLARYNGOLOGY

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-DEC-15

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-APR-21

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A
5565 GROSSMONT
CENTER DR BLDG 3 STE 101

**C1. 網絡內提供者清單
專科護理醫師**

LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-DEC-15

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-APR-21

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-23

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Effective as of 01-JUN-20

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-AUG-16

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-FEB-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-MAY-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

SKELTON, SEAN, DO†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

SKELTON, SEAN, DO†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-21

SKELTON, SEAN, DO†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PEDIATRICS

SHAHBAZ, MAJID, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 408
LA MESA, CA 91942

Effective as of 01-MAR-18

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

KATZEN, SETH, DO

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-NOV-22

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA, PA

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

ELO, KRISTIN, PA†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

FERRARA, SAMANTHA, PA

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE I
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

GUTH, CARA, PA

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

HINKLE, CORINNE, PA

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE I
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-24

KHALEGHI, MANI, PA†

Provider ID: N/A

☒ 5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

MOORMAN, KRISTA, PA

Provider ID: N/A

☒ 7339 EL CAJON BLVD STE I
LA MESA, CA 91942

Effective as of 01-MAY-22

C1. 網絡內提供者清單 專科護理醫師

PYLE, ALEXANDRA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-24

TAYLOR, RYAN, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-24

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-MAY-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-23

PODIATRIST

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-AUG-23

COX, KEVIN, DPM

Provider ID: N/A

5129 GARFIELD ST
LA MESA, CA 91941

Effective as of 01-APR-23

KRIGER, STEPHEN, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510

LA MESA, CA 91942

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510

LA MESA, CA 91942

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942
Effective as of 01-SEP-23

XU, DIXON, DPM†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

☒ 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942
Effective as of 01-SEP-22

PSYCHIATRY

MILLER, BRIAN, MD

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JUL-23

MILLER, BRIAN, MD

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JUL-23

PULMONARY DISEASES

AL-NASER, RAED, MD

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-AUG-23

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-OCT-22

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†

Provider ID: N/A

☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

☒ 8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

MOORE, BRIAN, MD†

Provider ID: N/A

☒ 8881 FLETCHER PKWY STE
102
LA MESA, CA 91942
Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

☒ 8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-SEP-22

VENKATESH, VIJAY, MD†

Provider ID: N/A

☒ 8881 FLETCHER PKWY STE
102
LA MESA, CA 91942
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

☒ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

CONCHA URDAY ZAA, JANNY, PT

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 5266 BALTIMORE DR
LA MESA, CA 91942
Effective as of 01-JAN-23

NGUYEN, STEVEN, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

NGUYEN, STEVEN, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-MAY-22

PAPA, AMY, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-21

SAHATDJIAN, EVA, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-21

THOMAS, KAITLIN, PT

Provider ID: N/A

☐ 8388 PARKWAY DR
LA MESA, CA 91942

Effective as of 01-NOV-23

RHEUMATOLOGY

KOTHA, AKTHER, MD†

Provider ID: N/A

☐ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-SEP-15

KOTHA, ROSHAN, MD†

Provider ID: N/A

☐ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-AUG-20

KOTHA, AKTHER, MD†

Provider ID: N/A

☐ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-DEC-23

KOTHA, AKTHER, MD†

Provider ID: N/A

☐ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

KOTHA, ROSHAN, MD†

Provider ID: N/A

☐ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

SURGERY GENERAL

DICKINSON, PHILLIP, MD†

Provider ID: N/A

☐ 8554 LA MESA BLVD
LA MESA, CA 91942
Effective as of 01-JAN-14

DICKINSON, PHILLIP, MD†

Provider ID: N/A

☐ 8554 LA MESA BLVD

LA MESA, CA 91942

Effective as of 01-JAN-24

DICKINSON, PHILLIP, MD†

Provider ID: N/A

☐ 8554 LA MESA BLVD
LA MESA, CA 91942
Effective as of 01-JUL-22

KHARAZI, ALEXANDRA, MD

Provider ID: N/A

☐ 8851 CENTER DR STE 500
LA MESA, CA 91942
Effective as of 01-MAY-23

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

SURGERY

NEUROLOGICAL

KURESHI, SOHAIB, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

☐ 5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-21

ZACHARIAH, MARCUS, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 210
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

HENDERSON, RODNEY, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAR-16

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-OCT-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

TAYYAB, NEIL, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942

Effective as of 01-FEB-07

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609

LA MESA, CA 91942

Effective as of 01-JAN-21

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-23

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

JAVIER DESLOGES, JUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-22

JUMA, SAAD, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

KEARSE, WILFRED, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-DEC-21

KEILLER, DANNY, MD

Provider ID: N/A

8850 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942

Effective as of 01-JAN-24

SALMASI, AMIRALI, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JUL-23

SALMASI, AMIRALI, MD†

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

CARDIAC

ELECTROPHYSIOLOGY

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

CARDIOVASCULAR DISEASE

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102

LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

DERMATOLOGY

BINGHAM, LUCAS, MD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-FEB-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694

Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-DEC-21

PETERSON, SAMUEL, MD†

Provider ID: N/A

600 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

EMERGENCY MEDICINE

TIMBOE, JENNA, MD

Provider ID: N/A

777 CORPORATE DR
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

WAINWRIGHT, MITCHELL, MD

Provider ID: N/A

800 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-SEP-18

INTERVENTIONAL CARDIOLOGY

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE 102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE 102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE 102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-JAN-16

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE 100
LADERA RANCH, CA 92694
Effective as of 01-DEC-15

NEUROLOGY

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE 110
LADERA RANCH, CA 92694

**C1. 網絡內提供者清單
專科護理醫師**

Effective as of 01-JUN-22

NEUROLOGY CHILD

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

OTOLARYNGOLOGY

KAUFMAN, AVRUM, DO

Provider ID: N/A

800 CORPORATE DR STE
290
LADERA RANCH, CA 92694

Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694

Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-22

RUMMEL, LAURA, PA†

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-22

PODIATRIST

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694
Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

PSYCHIATRY

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-24

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE

C1. 網絡內提供者清單

專科護理醫師

260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

KINBACK, KEVIN, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

LAW, LINDSEY, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A
☒ 333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD

Provider ID: N/A
☒ 800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD

Provider ID: N/A
☒ 800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD†

Provider ID: N/A
☒ 777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

DOEZIE, ALLEN, MD†

Provider ID: N/A
☒ 777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

CERTIFIED NURSE

PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A
☒ 30201 GOLDEN LANTERN
STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A
☒ 31852 COAST HWY STE 300

C1. 網絡內提供者清單 專科護理醫師

LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

AWADALLA, FARAH, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 300
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

AWADALLA, FARAH, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 300
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-23

FAMILY PRACTICE

SANGUEDOLCE, JOHN, MD†

Provider ID: N/A

☒ 333 THALIA ST
LAGUNA BEACH, CA 92651
Effective as of 01-FEB-21

HEMATOLOGY / ONCOLOGY

VU, COLLIN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 320
LAGUNA BEACH, CA 92653
Effective as of 01-JAN-18

INFECTIOUS DISEASE

HAMIDI ASL, KAMRAN, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

OPHTHALMOLOGY

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

HENRICK, ANDREW, MD

Provider ID: N/A

☒ 31852 COAST HWY
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-19

PEDIATRIC CRITICAL CARE MEDICINE

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PEDIATRIC

PULMONOLOGY

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

☒ 31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

PODIATRIST

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

☒ 31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-19

PULMONARY DISEASES

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

☒ 31852 COAST HWY STE 201

C1. 網絡內提供者清單 專科護理醫師

LAGUNA BEACH, CA 92651
Effective as of 01-JAN-15

SHAHINIAN, GEORGE, MD†

Provider ID: N/A
☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A
☒ 31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-23

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-DEC-11

CHANG, STEVEN, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

CHANG, STEVEN, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

CHANG, STEVEN, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-13

COCCIA, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

COCCIA, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

COCCIA, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ABDOLLAHI, KARIM, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

GILLMAN, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

GILLMAN, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-APR-16

GILLMAN, MICHAEL, MD

Provider ID: N/A
☒ 31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†

Provider ID: N/A
☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A
☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

C1. 網絡內提供者清單 專科護理醫師

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-17

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

LIAO, OTTO, MD†

Provider ID: N/A

☒ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†

Provider ID: N/A

☒ 23025 MILL CREEK DR
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

BARNHILL, JOSHUA, MD

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 204

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

BARNHILL, JOSHUA, MD

Provider ID: N/A

☒ 23521 PASEO DE VALENCIA
STE 204

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

HO, ALAN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 7A

LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

HO, ALAN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 610

LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ANESTHESIOLOGY PAIN MANAGEMENT

ALSHARIF, KAIS, MD†

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120

LAGUNA HILLS, CA 92653

Effective as of 01-NOV-18

ALSHARIF, KAIS, MD†

Provider ID: N/A

☒ 24012 CALLE DE LA PLATA
STE 120

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 5A

LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-15

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610

LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-17

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-21

C1. 網絡內提供者清單
專科護理醫師

KUO, DENNIS, MD†

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MESSIHA, ANDREW, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE

VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

POURADIB, AMIR, MD†

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POURADIB, AMIR, MD†

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POURADIB, AMIR, MD†

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDIAC ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

BAHADORANI, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

C1. 網絡內提供者清單

專科護理醫師

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

DRURY, PAUL, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

FEINER, JEFFREY, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

GIM, RONALD, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†

Provider ID: N/A

☑ 24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-17

LAMONT, DANIEL, MD†

Provider ID: N/A

☑ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

LE, DAN, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LE, DAN, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LE, DAN, MD†

Provider ID: N/A

☑ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JAN-23

LYLE, DOUGLAS, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

PARISE, CHARLES, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

PATEL, MILAN, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

PATEL, MILAN, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

PATEL, MILAN, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-MAR-24

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VAN, HO HAI, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

ZAREMBA, MARK, MD†

Provider ID: N/A

☞ 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

ZAREMBA, MARK, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

CERTIFIED

ACUPUNCTURIST

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

SHE, WU, LAC†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

CERTIFIED NURSE

PRACTITIONER

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KHAN, KHADEER, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

KHURANA, ANIL, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

NGUYEN, MARICEL, NP

Provider ID: N/A

23181 VERDUGO DR STE

103A

LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

NGUYEN, MARICEL, NP

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

PARK, NURI, NP

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

C1. 網絡內提供者清單
專科護理醫師

PARK, SE, NP

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

**CERTIFIED REGISTERED
NURSE MIDWIFE**

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SAJADI, ALISA, CRNM

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CHIROPRACTOR

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

COSTALES, STEPHEN, DC

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LANIER, TIMOTHY, DC†

Provider ID: N/A

23412 MOULTON PKWY
STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

MCHONE, PATRICIA, DC†

Provider ID: N/A

24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-16

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

LEE, KATHERINE, MD

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

EMERGENCY MEDICINE

BLAND, HOWARD, MD

Provider ID: N/A

☐ 23595 MOULTON PKWY
STE E
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GEE, KELLY, DO†

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

ENDOCRINOLOGY

METABOLISM DIABETES

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

BANDUKWALA, RAHIL, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHAN, JESSICA, MD†

Provider ID: N/A

☐ 24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CHAN, JESSICA, MD†

Provider ID: N/A

☐ 24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

CHANG, KU JUEY, MD

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

CHANG, KU JUEY, MD

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-16

CHANG, KU JUEY, MD

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

CHANG, KU JUEY, MD

Provider ID: N/A

☐ 23141 MOULTON PKWY STE

C1. 網絡內提供者清單
專科護理醫師

102
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

FARJOU DI, FARHAD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 106
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

FARJOU DI, FARHAD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 106
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-APR-18

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-FEB-16

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-JUN-19

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-JUL-16

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-OCT-22

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102

C1. 網絡內提供者清單
專科護理醫師

LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-NOV-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-OCT-23

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-OCT-22

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE 102

LAGUNA HILLS, CA 92653
 Teleservice

Effective as of 01-OCT-23

TRAN, NEIL, MD

Provider ID: N/A

24321 AVENIDA DE LA CARLOTA

LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-23

ENDOCRINOLOGY

REPRODUCTIVE

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 503

LAGUNA HILLS, CA 92653*
 Effective as of 01-JUN-19

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 541

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-13

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 541

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-13

FAMILY PRACTICE

LEISH, BRIAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR STE 460

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

RIZNIS, TENGIS, MD†

Provider ID: N/A

24451 HEALTH CENTER DR

C1. 網絡內提供者清單
專科護理醫師

STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

FAMILY PRACTICE
GERIATRIC MEDICINE

PATEL, NEHAL, MD†

Provider ID: N/A

23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

PATEL, NEHAL, MD†

Provider ID: N/A

23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656
Effective as of 01-DEC-22

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656
Effective as of 01-DEC-22

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA

STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

C1. 網絡內提供者清單 專科護理醫師

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

GENERAL PRACTICE

SHAW, BRIAN, DO†

Provider ID: N/A

23265 S POINTE DR STE
100
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-15

HEMATOLOGY / ONCOLOGY

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-08

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

HASSAN, SARAH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

MALEKIRAD, JACQUELINE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MALEKIRAD, JACQUELINE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MALEKIRAD, JACQUELINE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MULTANI, GURPREET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

RAO, AMOL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SU, DERRICK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

C1. 網絡內提供者清單 專科護理醫師

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

☒ 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

HOSPITALIST MD/DO

ABCEDE, GAIL, MD†

Provider ID: N/A

☒ 24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

SINGH, DEEPTOT, MD

Provider ID: N/A

☒ 24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

INFECTIOUS DISEASE

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WHITE, ALAN, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

INTERNAL MEDICINE

BAE, CHAY, DO†

Provider ID: N/A

☒ 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

☒ 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

☐ 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]
Provider ID: N/A

☐ 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO[†]
Provider ID: N/A

☐ 26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

LO, ALAN, MD
Provider ID: N/A

☐ 25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653*
Effective as of 01-JAN-18

NGUYEN, AN, DO[†]
Provider ID: N/A

☐ 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

POURBABAK, SAM, MD
Provider ID: N/A

☐ 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-23

SOONG, YEN-HUI, MD[†]
Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOONG, YEN-HUI, MD[†]
Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KADIFA, FADY, MD[†]
Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VOVAN, THOMAS, MD[†]
Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**INTERVENTIONAL
CARDIOLOGY**

ALLAM, SHAMILI, MD
Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD
Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD
Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD[†]
Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-FEB-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-20

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

FRUMIN, HOWARD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 350
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

GAULT, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
 VALENCIA STE 30A
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-11

KARROWNI, WASSEF, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
 STE 500
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

LAMONT, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

LYLE, DOUGLAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

MASTERS, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 550
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

C1. 網絡內提供者清單
專科護理醫師

PARISE, CHARLES, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PARISE, CHARLES, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PARISE, CHARLES, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

PARISE, CHARLES, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PATEL, MILAN, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

PATEL, MILAN, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PATEL, MILAN, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

PATEL, MILAN, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

TURIY, YULIYA, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

TURIY, YULIYA, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

VAN, HO HAI, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALTERS, DANIEL, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

MACIEL, MARLA, LCSW

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ZARGARBASHI, STEFANIE, LCSW†

Provider ID: N/A

24321 AVENIDA DE LA

CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-04

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

CHAU, CINDY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

C1. 網絡內提供者清單 專科護理醫師

MILLS, MARLIN, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHRIVASTAVA, VINEET, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

SHRIVASTAVA, VINEET, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MEDICAL ONCOLOGY

VU, COLLIN, MD[†]

Provider ID: N/A

📄 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

NEONATAL / PERINATAL MEDICINE

BUSH, MELISSA, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MASAKI, DAMON, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

NEPHROLOGY

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📄 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📄 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

JAMES, JOJI, MD

Provider ID: N/A

📄 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

MANSOURY, HADI, MD

Provider ID: N/A

📄 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

MANSOURY, HADI, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NEUROLOGY

BANDARI, DANIEL, MD[†]

Provider ID: N/A

📄 24012 CALLE DE LA PLATA
STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

CHOAN, CAROLINE, MD

Provider ID: N/A

📄 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

LOC, KIET, MD[†]

Provider ID: N/A

📄 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

LOC, KIET, MD[†]

Provider ID: N/A

📄 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LOC, KIET, MD[†]

Provider ID: N/A

📄 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MAASUMI, KASRA, MD[†]

Provider ID: N/A

📄 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 8A

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

SHEN, MICHAEL, MD

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

☞ 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

OBSTETRICS / GYNECOLOGY

AL-AZAWI, HIND, MD

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

AL-AZAWI, HIND, MD

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHUNG, LINDA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

CHUNG, LINDA, MD†

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

☞ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

COUGH, HEIDI, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

COUGH, HEIDI, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DAVIS, STEPHANIE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAVIS, STEPHANIE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

DEJBAKSH, SHEILA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

☒ 24321 AVENIDA DE LA

CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

FREDERICK, JANE, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

FREDERICK, JANE, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

JOHNSON, SUSAN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KONG, GRACE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

LAM, KIM, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAM, KIM, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LO, PATRICIA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

LOPEZ, RACHAEL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

MASAKI, DAMON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MENDELSON, SUSAN, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MENDELSON, SUSAN, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

O TOOLE, MARY, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

O TOOLE, MARY, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

PATEL, MITA, MD

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

PETERS, AMY, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-20

PETERS, AMY, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-19

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

WINTER, MARC, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-20

C1. 網絡內提供者清單
專科護理醫師

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHEN, SANFORD, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653
Effective as of 01-APR-13

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

C1. 網絡內提供者清單
專科護理醫師

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207

LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207

LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

GWYNN, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA

C1. 網絡內提供者清單 專科護理醫師

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HENRICK, ANDREW, MD

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, JOHN, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-18

HWANG, JOHN, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HWANG, JOHN, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HWANG, JOHN, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

JOSON, PETER, MD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 306
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

JOSON, PETER, MD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-17

KELLER, CHARLES, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

KELLER, CHARLES, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KERSTEN, DIANA, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

KHAN, SAMIRA, MD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KIM, BRIAN, MD†

Provider ID: N/A

☞ 24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

KIM, BRIAN, MD†

Provider ID: N/A

☞ 24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

KIM, ESTHER, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

KIM, ESTHER, MD†

Provider ID: N/A

☞ 24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, BRIAN, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

C1. 網絡內提供者清單
專科護理醫師

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KNIGHT, DARREN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAR-18

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-18

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-21

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-21

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-13

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-13

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

LOGAN, DWAYNE, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-SEP-22

MCGUIRE, DESMOND, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

NOGUCHI, JONATHAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

PERRY, ANGELA, MD

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

☐ 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 LAGUNA HILLS, CA 92653
 Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 23521 PASEO VALENCIA

309
 LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-15

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-FEB-16

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

☐ 24022 CALLE DE LA PLATA
 STE 475
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-22

ROUHANI, BEHNAZ, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-APR-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

☐ 24401 CALLE DE LA LOUISA
 STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653
 Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

<p>☞ 23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALEHI-HAD, HANI, MD† Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALEHI-HAD, HANI, MD† Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 309 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>☞ 24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-21</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>☞ 24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-20</p> <p>SALIB, GEORGE, MD† Provider ID: N/A</p> <p>☞ 24422 AVENIDA DE LA CARLOTA STE 110 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-18</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>☞ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-OCT-23</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>☞ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-19</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>☞ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-JAN-18</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>☞ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-NOV-14</p> <p>SPANGGORD, HOLLY, MD† Provider ID: N/A</p> <p>☞ 24022 CALLE DE LA PLATA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-DEC-14</p> <p>TAYANI, RAMIN, MD Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-MAR-23</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>☞ 24401 CALLE DE LA LOUISA LAGUNA HILLS, CA 92653</p> <p>Effective as of 01-NOV-14</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p>	<p>☞ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>☞ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>☞ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-23</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>☞ 24401 CALLE DE LA LOUISA LAGUNA HILLS, CA 92653 Effective as of 01-DEC-14</p> <p>TEYMOORIAN, SAVAK, MD† Provider ID: N/A</p> <p>☞ 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653 Effective as of 01-APR-23</p> <p>TOMPKINS, BRETT, DO Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-24</p> <p>TOMPKINS, BRETT, DO Provider ID: N/A</p> <p>☞ 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-23</p>
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C1. 網絡內提供者清單
專科護理醫師

TOMPKINS, BRETT, DO

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WANG, YE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

YOU, TIMOTHY, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-05

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

OPTOMETRIST

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

LEI, SHARON, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 325
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

LEIGHT, TERRA, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

LEUNG, CHRISTINA, OD†

Provider ID: N/A

25260 LA PAZ RD STE G
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

MONTANA-COLLINS,

CLAUDIA, OD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 412
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NG, REBECCA, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

PHAN, MIMI, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

23521 PASEO DE VALENCIA
 STE 305
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 300
 LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

OTOLARYNGOLOGY

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 430
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 430
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 430
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-13

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
 MAGDALENA STE 430
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 370
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600

LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-MAR-16

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-11

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-OCT-11

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
 STE 600
 LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

C1. 網絡內提供者清單
專科護理醫師

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR

STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

SUN, PAUL, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, JOHN, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

YIAN, CHRISTOPHER, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

PEDIATRIC CARDIOLOGY

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

**PHYS MED/ REHAB PAIN
MEDICINE**

C1. 網絡內提供者清單 專科護理醫師

HANNA, ANDREW, DO

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PHYSICAL MEDICINE / REHABILITATION

ALSHARIF, KAIS, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HILAL, TARIQ, DO†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

HILAL, TARIQ, DO†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

KUO, DENNIS, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

LYNN, KENNETH, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA

STE 460

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

POURADIB, AMIR, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

POURADIB, AMIR, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD†

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA

Provider ID: N/A

☐ 24401 HEALTH CENTER DR
STE 200

C1. 網絡內提供者清單
專科護理醫師

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CARDENAS, RICARDO, PA†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDENAS, RICARDO, PA†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

DINH, Y NHA THI, PA†

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-15

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

NAGEL, IRENE, PA†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

OWEN, LISA, PA

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PETERMAN, KYLIE, PA

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

C1. 網絡內提供者清單
專科護理醫師

PETERMAN, KYLIE, PA

Provider ID: N/A

23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

TOWERY, BOBBY, PA†

Provider ID: N/A

24411 HEALTH CENTER DR STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

WANG, LILLIAN, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-FEB-22

PODIATRIST

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

24022 CALLE DE LA PLATA STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653

**C1. 網絡內提供者清單
專科護理醫師**

Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-16

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

YETTER, MARCUS, DPM†

Provider ID: N/A

☞ 23961 CALLE DE LA MAGDALENA STE 143
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

PSYCHIATRIC-MENTAL

HEALTH NURSE

PRACTITIONER

CARASQUERO, ANDREA, NP

Provider ID: N/A

☞ 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

CARASQUERO, ANDREA, NP

Provider ID: N/A

☞ 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KHURANA, ANIL, NP

Provider ID: N/A

☞ 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

KHURANA, ANIL, NP

Provider ID: N/A

☞ 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

PSYCHIATRY

CHU, WEIMING, MD†

Provider ID: N/A

☞ 24953 PASEO DE VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

CHU, WEIMING, MD†

Provider ID: N/A

☞ 24953 PASEO DE VALENCIA STE 7C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

EAGAN, TERRY, MD

Provider ID: N/A

☞ 23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

EAGAN, TERRY, MD

Provider ID: N/A

☞ 23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

PULMONARY DISEASES

CHANG, WILLIAM, DO†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

☞ 23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

C1. 網絡內提供者清單
專科護理醫師

CHANG, WILLIAM, DO†

Provider ID: N/A

☐ 23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR

STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KOHLI, SANJIVAN, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

<p>☞ 23141 MOULTON PKWY STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22</p> <p>KOHLI, SANJIVAN, MD† Provider ID: N/A</p> <p>☞ 23141 MOULTON PKWY STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22</p> <p>KOHLI, SANJIVAN, MD† Provider ID: N/A</p> <p>☞ 23141 MOULTON PKWY STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-23</p> <p>SHAHINIAN, GEORGE, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 620 LAGUNA HILLS, CA 92653 Effective as of 01-APR-23</p> <p>SINGH, SAMARJIT, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-22</p> <p>SINGH, SAMARJIT, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-19</p> <p>SINGH, SAMARJIT, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653</p>	<p>Effective as of 01-OCT-23</p> <p>SINGH, SAMARJIT, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22</p> <p>SOONG, YEN-HUI, MD† Provider ID: N/A</p> <p>☞ 23141 MOULTON PKWY STE 108 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-22</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-12</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-18</p> <p>VO, BRYAN, MD</p>	<p>Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-DEC-18</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p> <p>VO, BRYAN, MD Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p> <p>VOVAN, THOMAS, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-19</p> <p>VOVAN, THOMAS, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-22</p> <p>VOVAN, THOMAS, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p> <p>VOVAN, THOMAS, MD† Provider ID: N/A</p> <p>☞ 24411 HEALTH CENTER DR STE 560</p>
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C1. 網絡內提供者清單 專科護理醫師

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

RADIATION ONCOLOGY

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEE, SHARON, MD†

Provider ID: N/A

24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

RHEUMATOLOGY

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-15

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KHALEGHI DAMAVANDI, MIR BEHNAM, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

☐ 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

SURGERY COLON SURGERY

BRADY, MATTHEW, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

C1. 網絡內提供者清單
專科護理醫師

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-14

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BACON, LOUISE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

C1. 網絡內提供者清單
專科護理醫師

DEARING, DAVID, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

DEARING, DAVID, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HOLNESS, RONALD, MD†

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA

MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653*
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KUSHNER, KENNETH, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KUSHNER, KENNETH, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PHAM, ALEXANDER, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

☐ 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

ROBERTSON, ELSIE, MD
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

ROBERTSON, ELSIE, MD
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RONA, KAIS, MD
Provider ID: N/A

11 MAREBLU STE 200
LAGUNA HILLS, CA 92656*
Effective as of 01-FEB-23

SHARMA, RAHUL, DO†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHARMA, RAHUL, DO†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD
Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD
Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD
Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

WALLACE, WILLIAM, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WALLACE, WILLIAM, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

WATANABE, BRIAN, MD†

Provider ID: N/A

☒ 24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A

☒ 24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

WATANABE, BRIAN, MD†

Provider ID: N/A

☒ 24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-21

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-12

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-12

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-20

WONG, JASON, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-20

SURGERY GENERAL VASCULAR

DEARING, DAVID, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-18

DEARING, DAVID, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

DEARING, DAVID, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

SHARMA, RAHUL, DO†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-12

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SURGERY HAND ORTHOPEDIC

C1. 網絡內提供者清單

專科護理醫師

PATEL, AMAR, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

SURGERY

NEUROLOGICAL

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA

MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

HWANG, BRIAN, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

JACKSON, ROBERT, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

JACKSON, ROBERT, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

LIAUW, JASON, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

☐ 23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-22

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-OCT-22

SURGERY ORTHOPEDIC

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-SEP-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-OCT-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-DEC-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JAN-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JAN-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-JUL-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-MAY-22

SURGERY THORACIC

ALTSHULER, JEFFREY, MD†

Provider ID: N/A


24411 HEALTH CENTER DR

C1. 網絡內提供者清單
專科護理醫師

STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23


GRIFFITH, PATRICK, MD

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22


HARGROVE, RACHEL, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19


KANAAN, SAMER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17


KANAAN, SAMER, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-17


LAM, TUAN, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19


POWELL, LEDFORD, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

POWELL, LEDFORD, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POWELL, LEDFORD, MD†

Provider ID: N/A

 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-16

POWELL, LEDFORD, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

POWELL, LEDFORD, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-16

POWELL, LEDFORD, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

TENG, WANG, MD†

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

SURGICAL ONCOLOGY

BREMNER, AMY, MD†

Provider ID: N/A

☒ 24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-21

BREMNER, AMY, MD

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

BREMNER, AMY, MD

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

☒ 24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

☒ 25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-FEB-20

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

CHEVINSKY, MICHAEL, MD†

Provider ID: N/A

☞ 24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

**GRUENENFELDER, JENNIFER,
MD**

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
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HO, TAMMY, MD[†]

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23961 CALLE DE LA
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HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
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HO, TAMMY, MD[†]

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23961 CALLE DE LA
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HO, TAMMY, MD[†]

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23961 CALLE DE LA
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KIM, MOSES, MD[†]

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23961 CALLE DE LA
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KIM, MOSES, MD[†]

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23961 CALLE DE LA
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23961 CALLE DE LA
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KIM, MOSES, MD[†]

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KIM, MOSES, MD[†]

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LIAUW, JASON, MD

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PASIN, ERIK, MD

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24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
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Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
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PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
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PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
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PASIN, ERIK, MD

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24953 PASEO DE
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PASIN, ERIK, MD

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24321 AVENIDA DE LA
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PASIN, ERIK, MD

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24321 AVENIDA DE LA
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SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
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SHOURESHI, POONE, MD

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SINGH, KARAN, MD†

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SINGH, KARAN, MD†

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SINGH, KARAN, MD†

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SINGH, KARAN, MD†

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SPITZ, AARON, MD†

Provider ID: N/A

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
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SPITZ, AARON, MD†

Provider ID: N/A

☞ 25200 LA PAZ RD STE 200
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SPITZ, AARON, MD†

Provider ID: N/A

☞ 23961 CALLE DE LA
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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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SPITZ, AARON, MD†

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Effective as of 01-JAN-23

SU, DANIEL, MD†

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SU, DANIEL, MD†

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SU, DANIEL, MD†

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ALLERGY IMMUNOLOGY

DYER, MARC, MD

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DYER, MARC, MD

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DYER, MARC, MD

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AUDIOLOGIST

ABRAMSON, MARIA, AuD†

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☐ 28985 GOLDEN LANTERN
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ABRAMSON, MARIA, AuD†

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CERTIFIED

ACUPUNCTURIST

PARK, ERIC, LAC†

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STE 112
LAGUNA NIGUEL, CA 92677
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DERMATOLOGY

KLEIN, LORRIE, MD†

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☐ 30201 GOLDEN LANTERN
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LAGUNA NIGUEL, CA 92677
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KLEIN, LORRIE, MD†

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KLEIN, LORRIE, MD†

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KLEIN, LORRIE, MD†

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☒ 30201 GOLDEN LANTERN
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Effective as of 01-SEP-19

LANDER, JEFFREY, MD†

Provider ID: N/A

☒ 30201 GOLDEN LANTERN
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LANDER, JEFFREY, MD†

Provider ID: N/A

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LANDER, JEFFREY, MD†

Provider ID: N/A

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LEDON, JENNIFER, MD†

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LEDON, JENNIFER, MD†

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LEDON, JENNIFER, MD†

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LEDON, JENNIFER, MD†

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NAMI, NAVID, DO†

Provider ID: N/A

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ENDOCRINOLOGY

METABOLISM DIABETES

NEMATI, MARYAM, MD

Provider ID: N/A

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GASTROENTEROLOGY

ARGUELLO, JUAN, MD

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STE 215
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ARGUELLO, JUAN, MD

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GENERAL PRACTICE

PATEL, JYOTINKUMAR, MD†

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HEMATOLOGY / ONCOLOGY

WAGNER, EDWARD, MD

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INTERNAL MEDICINE

SHAHIM, ZAHRA, MD

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MEDICAL ONCOLOGY

WAGNER, EDWARD, MD

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NEUROLOGY CHILD

GARFINKLE, REBECCA, DO

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LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

GARFINKLE, REBECCA, DO

Provider ID: N/A

**C1. 網絡內提供者清單
專科護理醫師**

<p>☐ 30131 TOWN CENTER DR STE 245 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAY-14</p>	<p>STE 237 LAGUNA NIGUEL, CA 92677 Effective as of 01-SEP-19</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p>
<p>MCINTOSH, ANDREW, MD† Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 195 LAGUNA NIGUEL, CA 92677 Effective as of 01-NOV-13</p>	<p>PEDIATRIC ALLERGY / IMMUNOLOGY</p>	<p>☐ 30100 CROWN VALLEY PKWY STE 17C LAGUNA NIGUEL, CA 92677 Effective as of 01-OCT-23</p>
<p>MCINTOSH, ANDREW, MD† Provider ID: N/A</p>	<p>DYER, MARC, MD Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 120 LAGUNA NIGUEL, CA 92677 Effective as of 01-JAN-21</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 268 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAR-15</p>
<p>☐ 30131 TOWN CENTER DR STE 195 LAGUNA NIGUEL, CA 92677 Effective as of 01-NOV-14</p>	<p>PODIATRIST</p> <p>COX, MATTHEW, DPM Provider ID: N/A</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 268 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAR-15</p>
<p>MCINTOSH, ANDREW, MD† Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 195 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAR-21</p>	<p>☐ 30001 TOWN CENTER DR STE E2 LAGUNA NIGUEL, CA 92677 Effective as of 01-JAN-18</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30100 CROWN VALLEY PKWY STE 17C LAGUNA NIGUEL, CA 92677 Effective as of 01-OCT-23</p>
<p>MCINTOSH, ANDREW, MD† Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 195 LAGUNA NIGUEL, CA 92677 Effective as of 01-JAN-21</p>	<p>PSYCHOLOGIST</p> <p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 268 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAR-15</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30100 CROWN VALLEY PKWY STE 17C LAGUNA NIGUEL, CA 92677 Effective as of 01-OCT-23</p>
<p>PRZEKLASA AUTH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 237 LAGUNA NIGUEL, CA 92677 Effective as of 01-SEP-19</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR STE 268 LAGUNA NIGUEL, CA 92677 Effective as of 01-MAR-15</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>FAMILY PRACTICE SPORTS MEDICINE</p>
<p>PRZEKLASA AUTH, MELISSA, MD† Provider ID: N/A</p> <p>☐ 30131 TOWN CENTER DR</p>	<p>ENGELMAN, SUZANNE, PhD Provider ID: N/A</p> <p>☐ 30100 CROWN VALLEY PKWY STE 17C LAGUNA NIGUEL, CA 92677 Effective as of 01-OCT-23</p>	<p>GRAHAM, SCOTT, MD† Provider ID: N/A</p> <p>☐ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-22</p>

C1. 網絡內提供者清單
專科護理醫師

VENEZIANO, CHRISTOPHER, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-OCT-23	LAGUNA WOODS, CA 92637 Effective as of 01-JAN-18	LAGUNA WOODS, CA 92637 Effective as of 01-OCT-23
VENEZIANO, CHRISTOPHER, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-23	BATHAEE, FARSHAD, DPM Provider ID: N/A ☑ 24331 EL TORO RD STE 370 LAGUNA WOODS, CA 92637 Effective as of 01-JAN-17	PARK, JOSEPH, PT Provider ID: N/A ☑ 24361 EL TORO RD STE 140 LAGUNA WOODS, CA 92637 Effective as of 01-OCT-23
PHYSICIANS ASSISTANT	BATHAEE, FARSHAD, DPM Provider ID: N/A ☑ 24331 EL TORO RD STE 370 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	SURGERY HAND
BOW, LINDA, PA† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-SEP-23	ROOHIAN, ARSHIA, DPM Provider ID: N/A ☑ 24331 EL TORO RD STE 370 LAGUNA WOODS, CA 92637 Effective as of 01-DEC-21	MOSKOW, LONNIE, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-OCT-23
NGUYEN, TONY, PA† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-AUG-22	ROOHIAN, ARSHIA, DPM Provider ID: N/A ☑ 24331 EL TORO RD STE 370 LAGUNA WOODS, CA 92637 Effective as of 01-JUL-20	MOSKOW, LONNIE, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-23
NGUYEN, TONY, PA† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-AUG-22	REGISTERED PHYSICAL THERAPIST	SURGERY HAND ORTHOPEDIC
PODIATRIST	FRESHMAN, JANELLE, PT† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-FEB-23	KIM, ABRAHAM, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-MAY-22
BATHAEE, FARSHAD, DPM Provider ID: N/A ☑ 24331 EL TORO RD STE 370	FRESHMAN, JANELLE, PT† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-MAY-12	SURGERY ORTHOPEDIC
		AMINIAN, ARASH, MD† Provider ID: N/A ☑ 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637 Effective as of 01-MAY-12

C1. 網絡內提供者清單
專科護理醫師

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-NOV-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-11

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-22

GURBANI, AJAY, MD

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

JOHNSON, BRYCE, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
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92637

Effective as of 01-SEP-18

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-20

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-18

KIM, ABRAHAM, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200

C1. 網絡內提供者清單 專科護理醫師

LAGUNA WOODS, CA
92637

Effective as of 01-SEP-20

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-18

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-18

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JAN-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD


Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA


C1. 網絡內提供者清單
專科護理醫師

92637
 Teleservice
 Effective as of 01-DEC-23


MOLHO, DAVID, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Teleservice
 Effective as of 01-DEC-23


MOLHO, DAVID, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Teleservice
 Effective as of 01-DEC-23


MOLHO, DAVID, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Teleservice
 Effective as of 01-DEC-23

MOSKOW, LONNIE, MD†


Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-JAN-18

MOSKOW, LONNIE, MD†


Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-21

MOSKOW, LONNIE, MD†


Provider ID: N/A

 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-21


MOSKOW, LONNIE, MD†

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-MAY-22


MOSKOW, LONNIE, MD†

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-APR-11


MOSKOW, LONNIE, MD†

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-DEC-11


MOSKOW, LONNIE, MD†

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-MAY-12

MOSKOW, LONNIE, MD†


Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637


Effective as of 01-SEP-23

PATEL, AMAR, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637


Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637


Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637


Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637


Effective as of 01-JAN-24

PYRKO, PETER, MD

Provider ID: N/A
 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637

Effective as of 01-OCT-23

TOCCI, STEPHEN, MD†

Provider ID: N/A
 24310 MOULTON PKWY
 STE O563
 LAGUNA WOODS, CA
 92637

Effective as of 01-JUL-12

C1. 網絡內提供者清單
專科護理醫師

TOCCI, STEPHEN, MD†

Provider ID: N/A

☐ 24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

VENEZIANO, CHRISTOPHER,

MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-11

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-AUG-19

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-JAN-18

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-21

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA

92637
 Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A
 ☐ 24331 EL TORO RD STE 200
 LAGUNA WOODS, CA
 92637
 Effective as of 01-SEP-23

**CARDIOVASCULAR
 DISEASE**

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-JAN-17

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228

LAKE ELSINORE, CA 92532
 Effective as of 01-JUN-17

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-MAR-21

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-MAY-15

QASQAS, SHADI, MD†

Provider ID: N/A
 ☐ 31571 CANYON ESTATES DR
 STE 228
 LAKE ELSINORE, CA 92532
 Effective as of 01-MAY-15

**CERTIFIED NURSE
 PRACTITIONER**

AGORRILLA, MARIA, NP

Provider ID: N/A
 ☐ 31736 MISSION TRL STE G
 LAKE ELSINORE, CA 92530
 Effective as of 01-OCT-23

CHIROPRACTOR

HERNANDEZ, MARCO, DC

Provider ID: N/A
 ☐ 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A
 ☐ 30195 FRASER DR
 LAKE ELSINORE, CA 92530

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-FEB-24

JU, NATHANIEL, DC†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-22

FAMILY PRACTICE

VIDAL, MONICA, DO†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-22

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

KAAKI, BILAL, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-22

INTERNAL MEDICINE

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-OCT-20

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☐ 31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530

Effective as of 01-AUG-18

INTERVENTIONAL CARDIOLOGY

ATTIA, NADER, DO†

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-19

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-20

CHANG, DAVID, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

☐ 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY, MD†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530

Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

QADRI, FARNOOSH, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

REY, RODOLFO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

REY, RODOLFO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-22

REY, RODOLFO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

REY, RODOLFO, MD†

Provider ID: N/A

☐ 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24

VADAPARAMPIL, JANET, MD†

Provider ID: N/A

☐ 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

☐ 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

FATHI, NAGHMEH, PA

Provider ID: N/A

☐ 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-19

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

☐ 425 DIAMOND DR STE 105
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

PULMONARY DISEASES

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☐ 31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☐ 31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-13

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

☐ 31571 CANYON ESTATES DR
STE 219

LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT

Provider ID: N/A

☐ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

☐ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

☐ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

☐ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

EDDOW, JIM, PT†

Provider ID: N/A

☐ 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-20

EDDOW, JIM, PT†

Provider ID: N/A

☐ 425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

☐ 425 DIAMOND DR

C1. 網絡內提供者清單 專科護理醫師

LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

STEVENS, WHITNEY, PT

Provider ID: N/A

📍 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

STEVENS, WHITNEY, PT

Provider ID: N/A

📍 425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

TSAI, CHIAHONG, PT

Provider ID: N/A

📍 425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

📍 425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

ANESTHESIOLOGY

BUSTOS, JERROLD, MD†

Provider ID: N/A

📍 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

BUSTOS, JERROLD, MD†

Provider ID: N/A

📍 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANESTHESIOLOGY PAIN MANAGEMENT

BUSTOS, JERROLD, MD†

Provider ID: N/A

📍 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

CERTIFIED ACUPUNCTURIST

KIM, ILWHA, LAC

Provider ID: N/A

📍 23331 EL TORO RD STE 107
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

WEON, SUK KYENG, LAC

Provider ID: N/A

📍 23361 EL TORO RD STE 112
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

CERTIFIED NURSE PRACTITIONER

TRAN, STEPHANIE, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAR-24

TRAN, STEPHANIE, NP

Provider ID: N/A

📍 26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DERMATOLOGY

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

📍 23832 ROCKFIELD BLVD


C1. 網絡內提供者清單

專科護理醫師

STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22


BELL, IRA, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-FEB-19


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23


BENIK, KAREN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-OCT-18

TANG, KIM, MD[†]

Provider ID: N/A

☞ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-19

ENDOCRINOLOGY

METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

☞ 23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

☞ 23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

C1. 網絡內提供者清單
專科護理醫師

GASTROENTEROLOGY

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JAN-23

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-OCT-23

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

☒ 26672 PORTOLA PKWY STE 104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JAMAL, MOHAMMAD, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-22

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-APR-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103

LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUN-22

JECMENICA, MLADEN, MD†

Provider ID: N/A

☒ 26501 RANCHO PKWY S STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

C1. 網絡內提供者清單 專科護理醫師

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-JAN-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-FEB-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

GYNECOLOGY

WALLACE, PATRICIA, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY
STE 381
LAKE FOREST, CA 92691
Effective as of 01-FEB-24

INTERNAL MEDICINE

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630

Effective as of 01-APR-23

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

OPHTHALMOLOGY

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-JAN-21

OPTOMETRIST

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630

Effective as of 01-JAN-18

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-17

PHYSICIANS ASSISTANT

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DE LEON, ROBERT, PA†

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

C1. 網絡內提供者清單 專科護理醫師

DE LEON, ROBERT, PA[†]

Provider ID: N/A

☒ 24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

PSYCHIATRY

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-SEP-19

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☒ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

C1. 網絡內提供者清單 專科護理醫師

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD

STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD[†]

Provider ID: N/A

☐ 24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

PSYCHOLOGIST

KANG, EILEEN, PhD

Provider ID: N/A

☐ 13 ORCHARD STE 103
LAKE FOREST, CA 92630

Effective as of 01-MAY-15

KANG, EILEEN, PhD

Provider ID: N/A

☐ 13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT

Provider ID: N/A

☐ 22821 LAKE FOREST DR STE
100
LAKE FOREST, CA 92630
Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP

Provider ID: N/A

☐ 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☐ 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☐ 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☐ 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☒ 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☒ 22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

☒ 22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

UROLOGY

CHUANG, KAI-WEN, MD

Provider ID: N/A

☒ 26691 PLAZA
STE 130
LAKE FOREST, CA 92691
Effective as of 01-JAN-24

CHIROPRACTOR

CASTRO, DAVID, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-APR-24

CASTRO, DAVID, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-23

FULKS, ZACKARY, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAY-23

MANSOUR, RASHAD, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-DEC-23

ZECHA, RONALD, DC

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JUL-22

PSYCHIATRY

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU BARBARO, DOROTHY, MD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

PSYCHOLOGIST

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

☒ 10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

ANESTHESIOLOGY

GUIANG, RAINIER, MD†

Provider ID: N/A

☒ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

☒ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

☒ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

☒ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

**C1. 網絡內提供者清單
專科護理醫師**

***ANESTHESIOLOGY PAIN
MANAGEMENT***

CHEN, HAMILTON, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

📄 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

***CARDIOVASCULAR
DISEASE***

ALFAY, WISAM, MD

Provider ID: N/A

📄 26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

📄 26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-MAR-22

***CERTIFIED NURSE
PRACTITIONER***

LUCACI, BIANCA, NP

Provider ID: N/A

📄 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-APR-23

MELOT, KAREN, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

NGUYEN, ANDY, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125

C1. 網絡內提供者清單 專科護理醫師

MENIFEE, CA 92586
Effective as of 01-DEC-20

SERAILE, KIRSTEN, NP

Provider ID: N/A

☐ 29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

SERAILE, KIRSTEN, NP

Provider ID: N/A

☐ 29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

VIERA, LIANA, NP†

Provider ID: N/A

☐ 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

☐ 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

CHIROPRACTOR

FARSHLER, ANTHONY, DC†

Provider ID: N/A

☐ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

☐ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

☐ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☐ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☐ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

☐ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104

MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

HAIDER, UZMA, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

HAIDER, SHANZAY, MD

Provider ID: N/A

☐ 29826 HAUN RD STE 200

C1. 網絡內提供者清單 專科護理醫師

MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A
☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-21

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A
☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-NOV-22

GASTROENTEROLOGY

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A
☒ 29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

INTERNAL MEDICINE

JACOBS, NATALIA, MD

Provider ID: N/A
☒ 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A
☒ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JAN-22

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

GOKHROO, RAHUL, MD†

Provider ID: N/A
☒ 26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A
☒ 26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

LICENSED CLINICAL SOCIAL WORKER

TABIL-GALAPON, BERNICE, LCSW

Provider ID: N/A
☒ 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JUL-23

NEPHROLOGY

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A
☒ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-APR-23

CHARLES COWAN, TRICIA, DO†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☞ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125

MENIFEE, CA 92586

Effective as of 01-OCT-20

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-23

LAC, PETER, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-NOV-19

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-23

NATH, ASHOK, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

☞ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

☞ 29878 HAUN RD STE 200
MENIFEE, CA 92586

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-19

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YOUSSEF, AMR, DO†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☐ 27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

NEUROLOGY

TALANKI, VARUN, MD

Provider ID: N/A

☐ 29826 HAUN RD STE 209
MENIFEE, CA 92586

Effective as of 01-DEC-22

OBSTETRICS / GYNECOLOGY

HOM, KATHERINE, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

NIHIRA, MIKIO, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

NIHIRA, MIKIO, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-SEP-20

RIZVI, SYED, MD†

Provider ID: N/A

☐ 27174 NEWPORT RD STE 2
MENIFEE, CA 92584

Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-21

URSO, MARY JO, DO†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

C1. 網絡內提供者清單 專科護理醫師

URSO, MARY JO, DO[†]

Provider ID: N/A

📄 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

STOTLER, APRIL, OT

Provider ID: N/A

📄 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

📄 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

ZECHA, RICHARD, OT[†]

Provider ID: N/A

📄 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

ZECHA, RICHARD, OT[†]

Provider ID: N/A

📄 30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

OPHTHALMOLOGY

CHANG, TOM, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

CHAWLA, ANUJ, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202

MENIFEE, CA 92586
Effective as of 01-JUL-23

CHAWLA, ANUJ, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUN-16

CHOW, JASON, MD[†]

Provider ID: N/A

📄 27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-20

DAVIS, MICHAEL, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

GOLLOGLY, HEIDRUN, MD[†]

Provider ID: N/A

📄 29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

ISSA, REDA, MD[†]

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-21

LAZZARINI, THOMAS, MD

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LEE, JOHN, MD[†]

Provider ID: N/A

📄 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

LIN, THEODORE, MD[†]

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

LIN, THEODORE, MD[†]

Provider ID: N/A

📄 29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

C1. 網絡內提供者清單

專科護理醫師

LIN, THEODORE, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92586

Effective as of 01-APR-24

LOBUE, THOMAS, MD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586

Effective as of 01-APR-14

SAMUEL, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUL-23

SHELTON, RAYMOND, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAY-23

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

ZHOU, SIWEI, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAR-23

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-FEB-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-SEP-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-21

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-JUL-23

C1. 網絡內提供者清單

專科護理醫師

MCINTYRE, DEBRA, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MILLER, RYAN, OD

Provider ID: N/A

☒ 29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

TO, BRITTANY, OD

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

☒ 29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JAN-22

PHYSICAL MEDICINE / REHABILITATION

CHEN, HAMILTON, MD†

Provider ID: N/A

☒ 27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

☒ 29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

☒ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

LOPEZ, MARIA, PA†

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

PERSAUD, PRIA, MD

Provider ID: N/A

☒ 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

☒ 26926 CHERRY HILLS

C1. 網絡內提供者清單 專科護理醫師

BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

REGISTERED PHYSICAL THERAPIST

ALEXANDER, AUSTIN, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-DEC-20

ATKINS, AARON, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUL-23

BARI, MONICA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-OCT-23

GARCIA, JASON, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

GARCIA, JASON, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-23

HARMAN, JACY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

KARODY, ATULA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

RHEUMATOLOGY

BRAVO, ARLENE, MD†

Provider ID: N/A

29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-OCT-09

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAY-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

SURGERY GENERAL

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

C1. 網絡內提供者清單 專科護理醫師

CHAUDHURI, KALI, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

PANSE, MILIND, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200

MENIFEE, CA 92586

Effective as of 01-NOV-18

PANSE, MILIND, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

CRISELL, MONISHA, MD[†]

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586*
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD[†]

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LARSON, BENJAMIN, MD[†]

Provider ID: N/A

☐ 29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LUTTGE, SCOTT, MD

Provider ID: N/A

☐ 29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-MAY-23

NIHIRA, MIKIO, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD[†]

Provider ID: N/A

☐ 29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-OCT-21

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

BASEN, TYLER, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JUN-08

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-DEC-13

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-21

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO⁺

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244

MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

☐ 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

C1. 網絡內提供者清單 專科護理醫師

MEHTA, VINAY, MD

Provider ID: N/A

📍 27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

📍 26691 PLAZA STE 170
MISSION VIEJO, CA 92691

Effective as of 01-MAY-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-OCT-08

GERAYLI, AFSHIN, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-OCT-16

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

📍 25982 PALA STE 280
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

📍 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DESAI, ASEEM, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-10

HUNG, LYNNE, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

TIONGSON, JAY, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

TIONGSON, JAY, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

CARDIOVASCULAR DISEASE

ALOMARI, IHAB, MD

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

ALOMARI, IHAB, MD

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

CUA, BENNETT, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-AUG-18

CUA, BENNETT, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-AUG-18

DESAI, ASEEM, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-05

EUBANY, JACQUELINE, MD[†]

Provider ID: N/A

☐ 27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

EUBANY, JACQUELINE, MD[†]

Provider ID: N/A

☐ 27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

HEPNER, ABSALOM, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

HEPNER, ABSALOM, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

KULICK, DANIEL, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

KULICK, DANIEL, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

KULICK, DANIEL, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

KULICK, DANIEL, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-15

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

LOUSSARARIAN, ARTHUR, MD[†]

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

LOUSSARARIAN, ARTHUR, MD[†]

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

REDIKER, DONALD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200

MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-APR-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-APR-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-APR-23

DAVID, MARY LOU, NP†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F

MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

TORIOLA, ABIODUN, NP

Provider ID: N/A

30240 RANCHO VIEJO
SUITE E
MISSION VIEJO, CA 92675
Effective as of 01-JUL-23

DERMATOLOGY

BISUNA, BLANCA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-MAR-16

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

C1. 網絡內提供者清單
專科護理醫師

EMERGENCY MEDICINE

ELPEDES, BERNARD, DO[†]

Provider ID: N/A

23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

BARRERA, JOSEPH, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691^{*}

Effective as of 01-NOV-12

BARRERA, JOSEPH, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-02

BUI, AMY-VAN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

BUI, AMY-VAN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-FEB-15

CHAN, JESSICA, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-AUG-22

CHAN, JESSICA, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DAO, LISA, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

FRANKWICH, KAREN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-14

FRANKWICH, KAREN, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-14

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140

MISSION VIEJO, CA 92691

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD[†]

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

MULFORD, MIM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

MULFORD, MIM, MD[†]

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

MULFORD, MIM, MD[†]

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRAN, NEIL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

TRUONG, MICHAEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRUONG, MICHAEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

FAMILY PRACTICE

SPORTS MEDICINE

CUENCA, ARNOLD, DO†

Provider ID: N/A

📍 23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

CUENCA, ARNOLD, DO†

Provider ID: N/A

📍 23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO†

Provider ID: N/A

📍 23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

MARANDOLA, MICHAEL, MD

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANDOLA, MICHAEL, MD

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

GASTROENTEROLOGY

BAE, WANJUN, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BAE, WANJUN, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD†

Provider ID: N/A

📍 27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHAURASIA, OM, MD

Provider ID: N/A

📍 26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

📍 26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

C1. 網絡內提供者清單 專科護理醫師

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RAHMAN, HABIB, MD

Provider ID: N/A

26691 PLAZA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

ZABIHI, RAMIN, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-12

ZABIHI, RAMIN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZABIHI, RAMIN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

ZABIHI, RAMIN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

ZABIHI, RAMIN, MD†

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KANALY, KIM, MD

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

WALLACE, PATRICIA, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEMATOLOGY / ONCOLOGY

BENDER, RICHARD, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENDER, RICHARD, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

HU, JOHN, MD†

Provider ID: N/A

☐ 27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-20

HU, JOHN, MD†

Provider ID: N/A

☐ 27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-20

HUANG, DANIEL, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

LAZO, NELLY, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

LAZO, NELLY, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY

C1. 網絡內提供者清單 專科護理醫師

PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

INFECTIOUS DISEASE

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

REDDY, JAGADEESH, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

WAYNE, EDGAR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

WAYNE, EDGAR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

INTERNAL MEDICINE

AZAD, HABIB, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

JIANG, FEN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD

C1. 網絡內提供者清單 專科護理醫師

STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MIEL, RUFINA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

MIEL, RUFINA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERNAL MEDICINE CRITICAL CARE MEDICINE

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERNAL MEDICINE SPORTS MEDICINE

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

INTERVENTIONAL CARDIOLOGY

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-AUG-20

HUNG, LYNNE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

KOPLIK, SHERI, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

SUK, DAVID, MD

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MARRIAGE FAMILY THERAPIST

ORTIZ, TINA, MFT†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ORTIZ, TINA, MFT†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BENDER, RICHARD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NEPHROLOGY

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-JAN-18

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAVIKUMAR, ASHA, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

NEUROLOGY

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

FAHIMI, GOLSHAN, MD

Provider ID: N/A

26991 CROWN VALLEY

PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

KESARI, SANTOSH, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 110
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

LOPEZ VIZCARRA, MARCO, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-16

NIK, ANDREW, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

RAHIM, BASIT, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-AUG-19

RAHIM, BASIT, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-AUG-19

SALEHI, HAMID, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

SALEHI, HAMID, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-DEC-20

SALEHI, HAMID, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-AUG-11

SALEHI, HAMID, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

SALEHI, HAMID, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

SPOKOYNY, ELEONORA, MD[†]

Provider ID: N/A

☐ 25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

SPOKOYNY, ELEONORA, MD[†]

Provider ID: N/A

☐ 25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD[†]

Provider ID: N/A

☐ 25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD[†]

Provider ID: N/A

☐ 25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-JAN-14

SPOKOYNY, ELEONORA, MD[†]

Provider ID: N/A

☐ 25982 PALA STE 150
MISSION VIEJO, CA 92691

Effective as of 01-DEC-08

TEACHER, THEODORE, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-JAN-15

TEACHER, THEODORE, MD[†]

Provider ID: N/A

☐ 26691 PLAZA STE 235
MISSION VIEJO, CA 92691

Effective as of 01-JAN-15

VORA, RONAK, DO[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

VORA, RONAK, DO[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

NEUROLOGY CHILD

ELBALALESY, NASER, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-JAN-20

ELBALALESY, NASER, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD[†]

Provider ID: N/A

☐ 26800 CROWN VALLEY

C1. 網絡內提供者清單
專科護理醫師

PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

***OBSTETRICS /
GYNECOLOGY***

ABRAVESH, SOODABEH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JUL-14

BAILEY, THOMAS, MD†

Provider ID: N/A


26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

BENZL, JERRY, MD†

Provider ID: N/A


C1. 網絡內提供者清單

專科護理醫師

 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUN-11


BENZL, JERRY, MD†

Provider ID: N/A

 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12


BENZL, JERRY, MD†

Provider ID: N/A

 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10


BENZL, JERRY, MD†

Provider ID: N/A

 26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691
Effective as of 01-JUL-03


CVAR, KATHRYN, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 443
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10


CVAR, KATHRYN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


CVAR, KATHRYN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99


EDMUNDSON, MORIAH, DO†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21


EDMUNDSON, MORIAH, DO†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21


FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24


FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24


FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD†


Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO,


MD

Provider ID: N/A

 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24


FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

 30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24


GRANESE, MARSHA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18


GRANESE, MARSHA, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18


KANALY, KIM, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

KANALY, KIM, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

LEAVITT, JAMIE, MD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-05

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-DEC-07

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TRAN, BRYAN, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

OPHTHALMOLOGY

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

C1. 網絡內提供者清單 專科護理醫師

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-08

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-12

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAYANI, RAMIN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-12

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

OPTOMETRIST

ANSARI, SHORA, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

HWANG, DONNA, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

KHAN, CEMONE, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SAKO, AARON, OD

Provider ID: N/A

27724 SANTA MARGARITA
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-04

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

OTOLARYNGOLOGY

BREDENKAMP, JAMES, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

FEINBERG, STEVEN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HEINRICH, JAMES, MD

Provider ID: N/A


26730 CROWN VALLEY

C1. 網絡內提供者清單 專科護理醫師

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12


HEINRICH, JAMES, MD

Provider ID: N/A

 26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24


HEINRICH, JAMES, MD

Provider ID: N/A

 26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10


JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11


LUU, QUANG, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22


LUU, QUANG, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18


LUU, QUANG, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18


LUU, QUANG, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18


MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13


MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13


MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14


MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14


MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

 26726 CROWN VALLEY
PKWY STE 200

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

CHUN, DAVID, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

ELLINI, AHMAD, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 120A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD

Provider ID: N/A

☒ 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

GANDY, JODIE, MD†

Provider ID: N/A

☒ 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

GANDY, JODIE, MD

Provider ID: N/A

☒ 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

☒ 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

☒ 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

MUHONEN, LINDA, MD

Provider ID: N/A

☒ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

☒ 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

WEINER, KEITH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 264

MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PEDIATRIC INFECTIOUS DISEASES

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER

RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

PEDIATRIC NEPHROLOGY

ZAMAN, RUMINA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC SPORTS MEDICINE

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

PEDIATRIC SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-10

MCMICHAEL, JESSICA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-09

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

PEDIATRICS

CHAMBERLIN, JOSHUA, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

PHYS MED/ REHAB PAIN

C1. 網絡內提供者清單
專科護理醫師

MEDICINE

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

PHYSICAL MEDICINE /

REHABILITATION

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Effective as of 01-MAR-99

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-DEC-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-DEC-21

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-FEB-18

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-JAN-16

C1. 網絡內提供者清單

專科護理醫師

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-24

KENNEDY, KATHRYN, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691*
Effective as of 01-FEB-22

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A

26024 ACERO

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PARK, SUNG, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PARK, SUNG, PA

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

TERRERI, NATALIE, PA

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST

DAL PORTO-KUJANPAA,

STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

MCCANN, JAN, DPM

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

MCGRATH, BENJAMIN, DPM

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317

MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MCGRATH, BENJAMIN, DPM

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NGUYEN, HAN, DPM†

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

☞ 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

NOSRATI, SAM, DPM†

Provider ID: N/A

☞ 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

PENERA, KEITH, DPM†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

☞ 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

☞ 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

☞ 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

☞ 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

☞ 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

☞ 26691 PLAZA STE 201

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SPENCER, ROBERT, DPM†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110

MISSION VIEJO, CA 92691
Effective as of 01-JAN-16

PSYCHIATRY

ANOSHIVANI, ARDE, MD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

ANOSHIVANI, ARDE, MD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

26024 ACERO

MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PSYCHOLOGIST

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

FRANCIS, CATHERINE, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G

C1. 網絡內提供者清單

專科護理醫師

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300

C1. 網絡內提供者清單

專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

PULMONARY DISEASES

GOLDBERG, ROBERT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GOMEZ, GABRIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

QURESHI, TAUSEEF, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

TAMMELIN, BRUCE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

RADIATION ONCOLOGY

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER

C1. 網絡內提供者清單 專科護理醫師

RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

CHOU, WILLIAM, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD[†]

Provider ID: N/A
27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DOGGETT, STEPHEN, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

FENG, CHU-PEI, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LEE, SHARON, MD[†]

Provider ID: N/A
27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LIU, GENE FU, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD

STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

LIU, GENE FU, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

YOUNG, CAROLYN, MD[†]

Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD[†]

Provider ID: N/A
27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY

C1. 網絡內提供者清單
專科護理醫師

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17

DRIVER, CATHERINE, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

DRIVER, CATHERINE, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

FARSHAMI, FATEMEH, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

KOVACS, DAVID, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

PHILIPOSE, JAYA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SINGH, SIMRANJIT, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

***SURGERY COLON
SURGERY***

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

C1. 網絡內提供者清單
專科護理醫師

SURGERY CRITICAL CARE

YU, PETER, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440

MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-22

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

ANDERSON, MARLA, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

BACON, LOUISE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

BRADY, MATTHEW, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

BRADY, MATTHEW, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

KUSHNER, KENNETH, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

KUSHNER, KENNETH, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

KUSHNER, KENNETH, MD†

Provider ID: N/A


27799 MEDICAL CENTER
RD

C1. 網絡內提供者清單 專科護理醫師

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

SHAVER, JOHN, MD†


Provider ID: N/A

 27799 MEDICAL CENTER

RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


SHAVER, JOHN, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


SHAVER, JOHN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A


 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SURGERY

NEUROLOGICAL


KIM, KEUN YOUNG, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15


KIM, KEUN YOUNG, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15


KIM, KEUN YOUNG, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15


KIM, KEUN YOUNG, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

LIAUW, JASON, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 561
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

C1. 網絡內提供者清單

專科護理醫師

MAGGE, SURESH, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MUHONEN, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-DEC-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-NOV-16

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-NOV-16

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-15

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-15

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-NOV-07

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-17

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUN-16

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-APR-12

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-22

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-MAR-20

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691

Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-NOV-20

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JUL-07

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-NOV-21

GUERRERO, EVAN, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101

C1. 網絡內提供者清單

專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANGI, KENT, MD†

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

📍 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MORRIS, JOHN, MD†

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

MORRIS, JOHN, MD†

Provider ID: N/A

📍 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

PARK, SAMUEL, MD

Provider ID: N/A

📍 26730 CROWN VALLEY

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

📍 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

📍 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

PARK, SAMUEL, MD

Provider ID: N/A

📍 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

PODOLSKY, ANATOL, MD†

Provider ID: N/A

📍 26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

📍 26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

📍 26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

📍 26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

📍 26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PORAT, SHAROUN, MD†

Provider ID: N/A

📍 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

PORAT, SHAROUN, MD†

Provider ID: N/A

📍 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

📍 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A


📍 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A


C1. 網絡內提供者清單

專科護理醫師

 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


PORAT, SHAROUN, MD†

Provider ID: N/A

 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


PORAT, SHAROUN, MD†

Provider ID: N/A

 27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20


ROSENFELD, SAMUEL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


ROSENFELD, SAMUEL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20


ROSENFELD, SAMUEL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12


ROSENFELD, SAMUEL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08


SCHLECHTER, JOHN, DO†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20


TOCCI, STEPHEN, MD

Provider ID: N/A

 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


TOCCI, STEPHEN, MD

Provider ID: N/A

 26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


WANG, WILLIAM, MD†

Provider ID: N/A

 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18


WANG, WILLIAM, MD†

Provider ID: N/A

 26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18


WEINERT, CARL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08


WEINERT, CARL, MD†

Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

WEINERT, CARL, MD†


Provider ID: N/A

 25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

SURGERY PEDIATRIC


GERMAN, JOHN, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-17


LAM, VINH, MD†

Provider ID: N/A

 27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

SURGERY PLASTIC

C1. 網絡內提供者清單

專科護理醫師

LEE, MICHAEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LEE, MICHAEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 585
MISSION VIEJO, CA 92691
Effective as of 01-MAY-19

SURGERY THORACIC

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

SAFFARZADEH, AREO, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 461

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

TANG, TAYLOR, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16

THIBAUT, WILLIAM, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

C1. 網絡內提供者清單

專科護理醫師

THIBAUT, WILLIAM, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

THIBAUT, WILLIAM, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY

PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†

Provider ID: N/A

☐ 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

☐ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

☐ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

☐ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

BUI, DON, MD†

Provider ID: N/A

☐ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

☐ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

C1. 網絡內提供者清單

專科護理醫師

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD


Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD


Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


NAKAMURA, LEAH, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


NAKAMURA, LEAH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18


NAKAMURA, LEAH, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


NAKAMURA, LEAH, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22


PASIN, ERIK, MD

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


RANDALL, JOSH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


RANDALL, JOSH, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


SHOURESHI, POONE, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23


SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SINGH, KARAN, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

☞ 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

SPITZ, AARON, MD

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

SPITZ, AARON, MD

Provider ID: N/A

☞ 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

STEPHANY, HEIDI, MD

Provider ID: N/A

☞ 26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

SU, DANIEL, MD

Provider ID: N/A

☞ 26991 CROWN VALLEY
PKWY STE 120

C1. 網絡內提供者清單 專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SU, DANIEL, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY

C1. 網絡內提供者清單 專科護理醫師

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

ALLERGY IMMUNOLOGY

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

ANESTHESIOLOGY

BAKER, BRUCE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-22

DRUET, JACK, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

KRAUSE, MARTIN, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-FEB-22

ANESTHESIOLOGY PAIN MANAGEMENT

AUSTIN, MARK, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-DEC-18

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563
Effective as of 01-JUL-23

KHATIBI, NIKAN, DO†

Provider ID: N/A

24910 LAS BRISAS RD STE
121

MURRIETA, CA 92562
Effective as of 01-SEP-22

CARDIAC

ELECTROPHYSIOLOGY

MESSENGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-FEB-19

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562*
Effective as of 01-JUL-23

CARDIOVASCULAR DISEASE

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-JUL-22

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

C1. 網絡內提供者清單 專科護理醫師

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

AMIN, JATIN, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice

Effective as of 01-MAR-20

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-SEP-18

BISWAS, MIMI, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

COLLINS, BRIAN, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

MESSENGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

MUKHERJEE, ASHIS, MD†

Provider ID: N/A

28078 BAXTER RD STE 110
MURRIETA, CA 92563*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562

Effective as of 01-JAN-21

OSHODI, GANIYU, MD

Provider ID: N/A

40770 CALIFORNIA OAKS

C1. 網絡內提供者清單 專科護理醫師

RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-23

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-18

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-21

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-20

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-SEP-18

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-FEB-22

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-MAY-20

SCHWARZ, ERNST, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-SEP-21

SCHWARZ, ERNST, MD†

Provider ID: N/A

☒ 39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-AUG-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

☒ 39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-AUG-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562

Effective as of 01-FEB-21

SEAMAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-MAY-20

CERTIFIED NURSE PRACTITIONER

ANDERSON, TRACEY, NP†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-20

BARBOZA, GEORGE, NP

Provider ID: N/A

☞ 39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92563

Effective as of 01-SEP-22

BARBOZA, GEORGE, NP

Provider ID: N/A

☞ 39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92563

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-MAY-22

CAMPBELL, AMBER, NP

Provider ID: N/A

☞ 25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562

Effective as of 01-JAN-22

CORCORAN, KIMBERLY, NP

Provider ID: N/A

☞ 24910 LAS BRISAS RD STE 105
MURRIETA, CA 92562

Effective as of 01-OCT-19

DAO, NU, NP†

Provider ID: N/A

☞ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAR-21

DONLON, RYAN, NPF

Provider ID: N/A

☞ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☞ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☞ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☞ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

FAIQ, JAMILA, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 206
MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-22

GUTIERREZ, CRYSTAL, NP†

Provider ID: N/A

☞ 25109 JEFFERSON AVE STE 100
MURRIETA, CA 92562

Effective as of 01-AUG-20

HARTMAN, JULIE, NPF

Provider ID: N/A

☞ 25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562

Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

☞ 25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562

Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200
MURRIETA, CA 92562

Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE 200

C1. 網絡內提供者清單 專科護理醫師

MURRIETA, CA 92562
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KLEWEIN, CRYSTAL, NPF

Provider ID: N/A
40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAY-23

KULJIAN, NANCY, NP

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD STE E
MURRIETA, CA 92563
Effective as of 01-AUG-21

MOONEY, PATRICIA, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-16

SICKELS, JENNIFER, NP

Provider ID: N/A
24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-19

VIERA, LIANA, NP†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD

MURRIETA, CA 92563
Effective as of 01-JAN-22

WILLEY, MARTI, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

DERMATOLOGY

CABRAL, ERIK, MD†

Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUN-22

FOWLER, VINCENT, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

KHERADMAND, SHIVA, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
200

C1. 網絡內提供者清單
專科護理醫師

MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

LEE, HELEN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

LEE, HELEN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-JAN-23

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAR-24

MUNYON, THOMAS, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

ROSHDIEH, BABAK, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-19

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-18

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

THIELE, JENS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-FEB-21

ENDOCRINOLOGY METABOLISM DIABETES

BUI, AMY-VAN, MD†

Provider ID: N/A

39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

FAMILY PRACTICE

FARZIN, ABDUL, MD

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-24

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

C1. 網絡內提供者清單 專科護理醫師

MURRIETA, CA 92562
Effective as of 01-SEP-15

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-APR-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 101

MURRIETA, CA 92562
Effective as of 01-AUG-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-APR-17

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562
Effective as of 01-MAR-21

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-JUL-23

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-OCT-07

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-15

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-20

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-15

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562

Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1

C1. 網絡內提供者清單 專科護理醫師

MURRIETA, CA 92562
Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563
Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563
Effective as of 01-APR-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-17

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAR-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUL-23

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-MAY-18

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562
Effective as of 01-OCT-16

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-SEP-19

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-FEB-20

GENETICS CLINICAL

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUL-19

HEMATOLOGY /

C1. 網絡內提供者清單
專科護理醫師

ONCOLOGY

AGAJANIAN, RICHY, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-JUL-23

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-APR-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-FEB-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-JAN-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-APR-23

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 206

MURRIETA, CA 92562

Teleservice

Effective as of 01-NOV-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A

25405 HANCOCK AVE STE 101
MURRIETA, CA 92562
Effective as of 01-APR-23

MASIELLO, DAVID, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 211
MURRIETA, CA 92562
Effective as of 01-MAR-21

C1. 網絡內提供者清單 專科護理醫師

MOST, CAROLE, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

NAIK, RAHUL, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

RAVINDRANATHAN, MEERA, MD

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-23

RAVINDRANATHAN, MEERA, MD

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-23

SARWARI, NAWID, MD

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562*

Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
203
MURRIETA, CA 92562

Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-JUL-23

SHUM, MERRILL, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
203
MURRIETA, CA 92562

Effective as of 01-JUL-23

TSANG, WALTER, MD†

Provider ID: N/A

☞ 25404 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

☞ 25404 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A

☞ 25404 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-FEB-20

WANG, AMY, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

☞ 25405 HANCOCK AVE STE
211
MURRIETA, CA 92562

Effective as of 01-JUN-21

INFECTIOUS DISEASE

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

HARFOUCH, CHAWKI, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUL-23

KIM, EMILY, MD
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

LE, THUAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

LE, THUAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-09

LE, THUAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JAN-11

INTERNAL MEDICINE

BASERI, BABAK, MD[†]
Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-APR-24

HADDADIN, HASSAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HARFOUCH, CHAWKI, MD[†]
Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUN-17

MONTANA, WILBUR, DO[†]
Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-NOV-18

INTERNAL MEDICINE CRITICAL CARE MEDICINE

PATEL, SAGAR, MD[†]
Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL, MD[†]
Provider ID: N/A

28062 BAXTER RD
MURRIETA, CA 92563
Effective as of 01-JAN-21

AMIN, JATIN, MD[†]
Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JAN-19

ATTIA, NADER, DO[†]
Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JAN-19

ATTIA, NADER, DO[†]
Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-APR-17

GAGLANI, RAHUL, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
230

MURRIETA, CA 92562

Effective as of 01-AUG-21

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-JAN-19

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

MATERNAL AND FETAL MEDICINE

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562*

Effective as of 01-MAY-24

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562

Effective as of 01-DEC-10

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-MAY-23

SHAIKH, ANWER, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-JUL-23

NEPHROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

NEUROLOGY

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAY-14

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAR-15

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-FEB-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-DEC-22

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562
Effective as of 01-AUG-20

NEUROLOGY CHILD

NUNE, SUNITHA, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-APR-21

OBSTETRICS / GYNECOLOGY

ANDERSEN, MICHAEL, MD†

Provider ID: N/A

☐ 24619 WASHINGTON AVE
STE 104

MURRIETA, CA 92562
Effective as of 01-JAN-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

☐ 25405 HANCOCK AVE STE
217

MURRIETA, CA 92562
Effective as of 01-JUL-21

BRAR, HARBINDER, MD†

Provider ID: N/A

☐ 25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562
Effective as of 01-JUL-11

BRAR, HARBINDER, MD†

Provider ID: N/A

☐ 25109 JEFFERSON AVE STE

210

MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

☐ 25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

☐ 25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

☐ 25109 JEFFERSON AVE STE
210

MURRIETA, CA 92562
Effective as of 01-NOV-08

CHIODI, MARTINA, MD†

Provider ID: N/A

☐ 24910 LAS BRISAS RD STE
113

MURRIETA, CA 92562
Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD

Provider ID: N/A

☐ 25405 HANCOCK AVE STE
203

MURRIETA, CA 92562
Effective as of 01-SEP-23

ELFELT, TIMOTHY, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 100

MURRIETA, CA 92562
Effective as of 01-AUG-10

C1. 網絡內提供者清單
專科護理醫師

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-10

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Effective as of 01-AUG-10

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-18

NEAL, JAMES, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

QUINATA, FLORENCE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

**SHEHATA, HANNAH LOUISE,
MD†**

Provider ID: N/A

25395 HANCOCK AVE STE

210

MURRIETA, CA 92562

Effective as of 01-OCT-21

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

TODD, CHRISTINE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562

Effective as of 01-JUL-23

TRAN, THERESA, DO

Provider ID: N/A

24910 LAS BRISAS RD STE
113
MURRIETA, CA 92562

Effective as of 01-MAR-20

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-SEP-22

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER

C1. 網絡內提供者清單 專科護理醫師

DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-10

OCCUPATIONAL THERAPIST

BAST, SIDNEY, OT†
Provider ID: N/A
24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-OCT-19

BAST, SIDNEY, OT†
Provider ID: N/A
24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT
Provider ID: N/A
24671 MONROE AVE STE
C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT
Provider ID: N/A
24671 MONROE AVE STE
C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT†
Provider ID: N/A
24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT†
Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-21

STOTLER, APRIL, OT
Provider ID: N/A
24671 MONROE AVE STE
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

STOTLER, APRIL, OT
Provider ID: N/A
24671 MONROE AVE STE
C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

ZECHA, RICHARD, OT†
Provider ID: N/A
24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

ZECHA, RICHARD, OT†
Provider ID: N/A
24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL, MD†
Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-MAR-18

CARLSON, JOHN, MD†
Provider ID: N/A
25395 HANCOCK AVE STE

100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CARLSON, JOHN, MD†
Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHAWLA, ANUJ, MD†
Provider ID: N/A
40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHIN, ERIC, MD†
Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-19

CHIN, ERIC, MD†
Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†
Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†
Provider ID: N/A
25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

C1. 網絡內提供者清單 專科護理醫師

CHIN, ERIC, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUN-23

CHOW, JASON, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

☐ 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-20

CULOTTA, ANTHONY, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice

Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-MAY-21

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-JAN-23

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

☐ 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

☐ 40690 CALIFORNIA OAKS

C1. 網絡內提供者清單 專科護理醫師

RD STE B
MURRIETA, CA 92562
Effective as of 01-OCT-17

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-17

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

JOHNSON, ROGER, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-FEB-22

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

LOBUE, THOMAS, MD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-OCT-09

NAWAZISH, SABA, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-MAY-17

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-18

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-22

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-DEC-21

VIDOR, IRA, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD
MURRIETA, CA 92562

Effective as of 01-JUL-19

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562

Effective as of 01-DEC-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-20

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-SEP-22

EVANS, RYAN, OD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562

Effective as of 01-APR-14

LARSON, BRETT, OD†

Provider ID: N/A

25460 MEDICAL CENTER

DR STE 103

MURRIETA, CA 92562

Effective as of 01-DEC-21

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-18

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-JAN-11

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-22

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JAN-23

C1. 網絡內提供者清單 專科護理醫師

SCOTT, JEFFREY, OD[†]

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-22

OTOLARYNGOLOGY

ABDOU, RAMI, MD[†]

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*
Effective as of 01-JUL-23

ABDOU, RAMI, MD[†]

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

BANTHIA, VISHAL, MD[†]

Provider ID: N/A

39755 DATE ST STE 105
MURRIETA, CA 92563*
Teleservice
Effective as of 01-JUL-23

DATE, AMIT, MD

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUN-05

FORRESTER, MICHAEL, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-DEC-15

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-FEB-23

TIAN, QING, MD[†]

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

PEDIATRIC CARDIOLOGY

CHU, JAMES, MD[†]

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201

MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD[†]

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD[†]

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD[†]

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD[†]

Provider ID: N/A

25470 MEDICAL CENTER

C1. 網絡內提供者清單 專科護理醫師

DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A
☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A
☒ 25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT

ARROYO, ARIANNA, PA

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210

MURRIETA, CA 92562
Effective as of 01-JUN-23

BASIN, NATALIE, PA

Provider ID: N/A
☒ 25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-23

FRYER, KEVIN, PA

Provider ID: N/A
☒ 28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

GAUSEPOHL, MARY, PA†

Provider ID: N/A
☒ 24910 LAS BRISAS RD STE
116
MURRIETA, CA 92562*
Effective as of 01-SEP-21

GAUSEPOHL, MARY, PA†

Provider ID: N/A
☒ 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562*
Effective as of 01-SEP-21

HILLER, ASHLEY, PA

Provider ID: N/A
☒ 28078 BAXTER RD STE
300-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

KAUFMAN, BRITNEY, PA†

Provider ID: N/A
☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

KAUFMAN, TIFFANY, PA†

Provider ID: N/A
☒ 24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-16

LANCASTER, MICHELLE, PA†

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A
☒ 25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LEE, WILLIAM, PA†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LEE, WILLIAM, PA†

Provider ID: N/A

☒ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LIN, RAY, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-NOV-18

NEALEIGH, NATALIE, PA†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-17

QUEROL, CYRUS, PA

Provider ID: N/A

☒ 28078 BAXTER RD STE 312
MURRIETA, CA 92563
Effective as of 01-APR-24

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

☒ 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-20

QUISMORIO, DEMETRIO, PA†

Provider ID: N/A

☒ 28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

☒ 24703 MONROE AVE
MURRIETA, CA 92562
Effective as of 01-SEP-23

ST JULES, JESSICA, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

ST JULES, JESSICA, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-NOV-18

TAYLOR, ISHA, PA

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

VALENTA, CAYLIE, PA†

Provider ID: N/A

☒ 40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-JAN-21

WOOLEY, LAURA, PA†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

PODIATRIST

EVANS, RICHARD, DPM

Provider ID: N/A

☒ 39755 MURRIETA HOT

C1. 網絡內提供者清單 專科護理醫師

SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15

EVANS, RICHARD, DPM

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24

EVANS, RICHARD, DPM

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-06

NGUYEN, THO, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-AUG-16

NGUYEN, THO, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

SCOTT, SUSAN, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

WELLS, JOSEPH, DPM†

Provider ID: N/A

☒ 24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-16

PULMONARY DISEASES

HADDADIN, HASSAN, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JUL-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HENNINGER, DELMER, MD
Provider ID: N/A

☒ 39755 DATE ST STE 101
MURRIETA, CA 92563*
Effective as of 01-JUL-23

HENNINGER, DELMER, MD
Provider ID: N/A

☒ 39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD
Provider ID: N/A

☒ 39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

KUMAR, AVNEE, MD
Provider ID: N/A

☒ 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-JUL-23

SIEN, STEFAN, DO†
Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-FEB-15

SIEN, STEFAN, DO†
Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

SURI, RAJAT, MD†
Provider ID: N/A

☒ 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562
Effective as of 01-AUG-21

VEGA, RICARDO, MD†
Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†
Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†
Provider ID: N/A

☒ 28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

RADIATION ONCOLOGY

QUANG, TONY, MD
Provider ID: N/A

☒ 40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-OCT-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD†
Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†
Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-DEC-22

PATEL, NIKHIL, MD†
Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†
Provider ID: N/A

☒ 25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

REGISTERED DIETITIAN / NUTRITIONIST

BLUCHER, CHERI, RD
Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN
Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN
Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN
Provider ID: N/A

☒ 29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-FEB-22

C1. 網絡內提供者清單 專科護理醫師

JACKSON, ALLYSON, RD

Provider ID: N/A

29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-21

JACKSON, ALLYSON, RD

Provider ID: N/A

29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

ROBERTS, LISA, RD

Provider ID: N/A

29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

WAYNE, DIANE, RD

Provider ID: N/A

29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

WAYNE, DIANE, RD

Provider ID: N/A

29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-MAY-22

AGENA, CYAN, PT†

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-MAY-22

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-DEC-20

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

27722 CLINTON KEITH RD
STE B-C
MURRIETA, CA 92562
Effective as of 01-JUL-19

ATKINS, AARON, PT

Provider ID: N/A

24630 WASHINGTON AVE
STE 201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

24630 WASHINGTON AVE
STE 201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, AARON, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-NOV-18

ATKINS, AARON, PT

Provider ID: N/A

24671 MONROE AVE STE
C-201
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

24671 MONROE AVE STE
C-201
MURRIETA, CA 92562

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-23

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JUN-23

ATKINS, AARON, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JUL-23

ATKINS, AARON, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JUL-23

ATKINS, WILLIAM, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JUN-23

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562

Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562

Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C201

MURRIETA, CA 92562

Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

25136 HANCOCK AVE STE A
MURRIETA, CA 92562

Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-OCT-23

KARODY, ATULA, PT

Provider ID: N/A

25136 HANCOCK AVE
MURRIETA, CA 92562

Effective as of 01-FEB-24

KARODY, ATULA, PT

Provider ID: N/A

25136 HANCOCK AVE
MURRIETA, CA 92562

Effective as of 01-FEB-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101

MURRIETA, CA 92562

Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101

MURRIETA, CA 92562

Effective as of 01-MAR-24

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101

MURRIETA, CA 92562

Effective as of 01-MAY-22

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101

MURRIETA, CA 92562

Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 39755 MURRIETA HT SP
F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON SURGERY

MOORE, PATRICK, MD†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUL-23

MOORE, PATRICK, MD†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUN-20

SURGERY GENERAL

BATRA, MUNISH, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 303

MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BERNSTEIN, DAVID, MD

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-FEB-23

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

☒ 41670 IVY ST STE B

C1. 網絡內提供者清單 專科護理醫師

MURRIETA, CA 92562
Effective as of 01-NOV-23

CROSS, MICHAEL, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, FESTUS, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

DADA, FESTUS, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

DADA, STEPHEN, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-18

DADA, FESTUS, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, STEPHEN, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAY-14

DADA, FESTUS, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUN-17

IGWE, DANIEL, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

KRAHN, DOUGLAS, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

LIEN, CHRISTINA, DO

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

LIEN, CHRISTINA, DO

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562

Effective as of 01-JUL-23

MEHTA, PRATIK, MD†

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

POLLACK, JAMES, MD†

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

SAMIMI, KIAN, MD

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

**C1. 網絡內提供者清單
專科護理醫師**

Effective as of 01-DEC-12

SUH, DAVID, MD[†]

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-DEC-12

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JUN-23

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JUN-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-MAR-23

WANG, SHIN-CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-MAR-23

WANG, SHIN-CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-FEB-23

***SURGERY GENERAL
VASCULAR***

CHIN, MICHAEL, MD[†]

Provider ID: N/A

41670 IVY ST STE B

MURRIETA, CA 92562

Effective as of 01-APR-20

CHIRIANO, JASON, DO

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203

MURRIETA, CA 92562

Effective as of 01-MAR-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

SURGERY HAND PLASTIC

KUPFER, DAVID, MD[†]

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303

MURRIETA, CA 92562

Effective as of 01-SEP-09

SURGERY

NEUROLOGICAL

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-OCT-15

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-MAR-17

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-FEB-18

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-FEB-20

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-FEB-20

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-SEP-17

ABSHIRE, BRET, MD[†]

Provider ID: N/A

25150 HANCOCK AVE STE
210

MURRIETA, CA 92562

Effective as of 01-SEP-17

C1. 網絡內提供者清單
專科護理醫師

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-14

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE

210

MURRIETA, CA 92562

Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-19

OH, GERALD, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-17

SURGERY ORTHOPEDIC

AGYEMAN, KOFI, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAR-22

CHENG, WAYNE, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563

Effective as of 01-JAN-24

CHENG, WAYNE, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

DRINHAUS, ROLF, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-NOV-16

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

521 E ELDER STREET
SUITE 202
MURRIETA, CA 92562
Effective as of 01-AUG-20

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE

C1. 網絡內提供者清單
專科護理醫師

200
MURRIETA, CA 92562
Effective as of 01-AUG-23

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-23

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-NOV-21

GHAYOUMI, POURIYA, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-NOV-21

JERCINOVICH, IGOR, MD

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-OCT-20

JERCINOVICH, IGOR, MD

Provider ID: N/A
25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-07

KIMBALL, JEFF, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-23

KIMBALL, JEFF, MD

Provider ID: N/A
28078 BAXTER RD STE 330

MURRIETA, CA 92563
Effective as of 01-DEC-23

LOCKE, JOHN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

LOCKE, JOHN, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

LUNA, MARIO, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

LUNA, MARIO, MD

Provider ID: N/A
39755 DATE ST STE 104
MURRIETA, CA 92563
Effective as of 01-MAR-23

ODA, NINOS, MD

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-23

ODA, NINOS, MD

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-23

SAADAT, ARDAVAN, MD†

Provider ID: N/A
25395 HANCOCK AVE STE

C1. 網絡內提供者清單 專科護理醫師

240
MURRIETA, CA 92562
Effective as of 01-NOV-21

SAADAT, ARDAVAN, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-NOV-21

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563

Effective as of 01-JAN-22

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

TOOMA, GHASSAN, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

SURGERY PLASTIC

BATRA, MUNISH, MD

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562*
Effective as of 01-JUL-23

KUPFER, DAVID, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

NEWMAN, DAVID, MD

Provider ID: N/A
25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-JAN-06

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-SEP-13

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A
28078 BAXTER RD STE 510
MURRIETA, CA 92563
Effective as of 01-JUN-21

VO, QUANG, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

VO, QUANG, MD†

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

UROLOGY

CONNER, RICHARD, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CONNER, RICHARD, MD†

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

CRISELL, MONISHA, MD†
Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†
Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

CRISELL, MONISHA, MD†
Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†
Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-04

CRISELL, MONISHA, MD†
Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-15

KIM, FRANK, MD†
Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

LARSON, BENJAMIN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER

C1. 網絡內提供者清單 專科護理醫師

DR STE 204
MURRIETA, CA 92562
Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

LOUIE, BRANDON, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LOUIE, BRANDON, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAR-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAR-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAY-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-FEB-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-19

SHAH, NEMI, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-24

SHAH, NEMI, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-24

TAKESITA, KEN, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TAKESITA, KEN, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TALANKI, VARUN, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-22

C1. 網絡內提供者清單 專科護理醫師

TALANKI, VARUN, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-22

TALANKI, VARUN, MD

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-22

TSI, SY, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

TSI, SY, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-22

TSI, SY, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-16

DEMULAPALLI, SREENIVAS, MD

Provider ID: N/A

☒ 28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562
Effective as of 01-MAY-20

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-13

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-14

DEMULAPALLI, SREENIVAS, MD†

Provider ID: N/A

☒ 25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-23

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-NOV-15

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-AUG-16

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-APR-16

CARDIOVASCULAR DISEASE

DAMANI, SAMIR, MD

Provider ID: N/A

☒ 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

KIM, JAMES, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-23

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

NANAVATI, VIMAL, MD

Provider ID: N/A

2345 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-FEB-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5

NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-23

SHEREV, DIMITRI, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DHARKAR SURBER, SAPNA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

330 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

340 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

KYI, MYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

C1. 網絡內提供者清單

專科護理醫師

LIM, IMELDA, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-OCT-22

OLESCO, JENNIFER, NP

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

REAL, MARIA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-21

SWEENEY, ZSA ZSA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-21

VILLANUEVA DE GUTIE, BERENICE, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAY-21

WILLIAMS, BREAUNA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MAST, ASHLEY, CRNM

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-SEP-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304

NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-SEP-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-AUG-22

GONZALEZ, JOSE, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

LIN, SHINKO, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-MAR-24

NELSON, AISLYN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-AUG-22

NELSON, AISLYN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-OCT-19

NELSON, AISLYN, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

📄 655 EUCLID AVE STE 304

C1. 網絡內提供者清單 專科護理醫師

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ENDOCRINOLOGY METABOLISM DIABETES

VALDEZ, KRystal, MD

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950*
Effective as of 01-AUG-23

GASTROENTEROLOGY

GISH, ROBERT, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-MAR-15

MAA CHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950*
Effective as of 01-AUG-21

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD STE

C1. 網絡內提供者清單 專科護理醫師

D
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CAMACHO, BENJAMIN, MD†
Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DAMANI, SAMIR, MD
Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

FERNANDEZ, GENARO, MD†
Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

FERNANDEZ, GENARO, MD†
Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

FERNANDEZ, GENARO, MD†
Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LY, NANCY, MD
Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD
Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD
Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD
Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†
Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PANDHI, JAY, MD†
Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†
Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

PANDHI, JAY, MD†
Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ROUGH, STEVEN, MD
Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD
Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD
Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

SHARF, ALBERT, MD
Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD
Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD
Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

WYSOCZANSKI, MARIUSZ, MD
Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

☐ 502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

☐ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

☐ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-21

SACHS, MELISSA, LCSW†

Provider ID: N/A

☐ 2400 E 8TH ST
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

☐ 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

KUEK, JOHN, MFT

Provider ID: N/A

☐ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

NEPHROLOGY

CALDERON MOLINA, JUAN, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

CALDERON MOLINA, JUAN, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A

☐ 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

COMUNALE, RODERICK, MD†

Provider ID: N/A

☐ 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-19

COMUNALE, RODERICK, MD†

Provider ID: N/A

☐ 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

MAA CHIP, FHARAK, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MAA CHIP, FHARAK, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

MAA CHIP, FHARAK, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

☐ 655 EUCLID AVE STE 303

C1. 網絡內提供者清單 專科護理醫師

NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

NEUROLOGY

BOBO, JERRY, MD†

Provider ID: N/A

📍 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

📍 2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ASLIAN, AZITA, MD†

Provider ID: N/A

📍 2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ASLIAN, AZITA, MD

Provider ID: N/A

📍 1136 D AVE
NATIONAL CITY, CA 91950*
Effective as of 01-SEP-23

DAVIS, TRACIE, MD

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-OCT-23

DEL ROSARIO, GELEN, MD†

Provider ID: N/A

📍 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DEL ROSARIO, GELEN, MD†

Provider ID: N/A

📍 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-21

MENDEZ, DIEGO, MD

Provider ID: N/A

📍 2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

OPHTHALMOLOGY

CARRABY, ARNETT, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHANG, TOM, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-22

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

C1. 網絡內提供者清單

專科護理醫師

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MANI, NASRIN, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MCDONNELL, EMMA, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MCGRAW, JOSEPH, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

MORRISON-REYES, JOSHUA,

C1. 網絡內提供者清單
專科護理醫師

MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

PAPASTERGIU, GEORGIOS, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, GITANE, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-20

PEAIRS, JAMES, MD†

Provider ID: N/A

1520 E PLAZA BLVD

NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SKAF, AYHAM, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

WAINESS, REID, MD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KHIEU, TINA, OD

Provider ID: N/A

2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

KHIEU, TINA, OD

Provider ID: N/A

2240 E PLAZA BLVD STE

C1. 網絡內提供者清單 專科護理醫師

F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KOO, ANITA, OD
Provider ID: N/A
☒ 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD
Provider ID: N/A
☒ 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARR, RYAN, OD
Provider ID: N/A
☒ 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

VINH, JOHN, OD†
Provider ID: N/A
☒ 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

PEDIATRIC EMERGENCY MEDICINE

BONSU, BEMA, MD†
Provider ID: N/A
☒ 1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PHYSICAL MEDICINE / REHABILITATION

CROWLEY, DONNA, MD†
Provider ID: N/A
☒ 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CROWLEY, DONNA, MD†
Provider ID: N/A
☒ 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-APR-14

PHYSICIANS ASSISTANT

HABBOUSH, RANA, PA
Provider ID: N/A
☒ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA
Provider ID: N/A
☒ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

LANDON, JEFFREY, PA
Provider ID: N/A
☒ 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-23

MACASADIA, MARITES, PA
Provider ID: N/A
☒ 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

MERCER, KELLY, PA†
Provider ID: N/A
☒ 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

SHAH, SHEENA, PA

Provider ID: N/A
☒ 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-21

SHAH, SHEENA, PA
Provider ID: N/A
☒ 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UDOH, EKAETE, PA
Provider ID: N/A
☒ 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†
Provider ID: N/A
☒ 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ATMAR, AKMAL, DPM†
Provider ID: N/A
☒ 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

CAINE, SAMUEL, DPM
Provider ID: N/A
☒ 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24

CAINE, SAMUEL, DPM
Provider ID: N/A
☒ 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-19

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

KRIGER, STEPHEN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-MAY-21

PSYCHIATRY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

BOBO, JERRY, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

📄 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

📄 3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

📄 3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

KUGEL, SAMUEL, MD†

Provider ID: N/A

📄 502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD†

Provider ID: N/A

📄 502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
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PSYCHOLOGIST

BAHENA-COLLEY, SANDRA, PSYD†

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BAHENA-COLLEY, SANDRA, PSYD†

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📄 217 HIGHLAND AVE
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GALANT, DANIEL, PhD

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📄 217 HIGHLAND AVE
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Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

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MIRANDA, CYNTHIA, PhD†

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MIRANDA, CYNTHIA, PhD†

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REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

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Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

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NATIONAL CITY, CA 91950
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A

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NATIONAL CITY, CA 91950
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HERMAN, RACHEL, PT†

Provider ID: N/A

📄 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

HERMAN, RACHEL, PT†

Provider ID: N/A

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NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

KARANDE, PRACHI, PT†

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📄 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

📄 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

📄 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

📄 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23

**C1. 網絡內提供者清單
專科護理醫師**

SURGERY PLASTIC

GUTTIKONDA, RAKHESH, DO

Provider ID: N/A

📍 655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

ALLERGY IMMUNOLOGY

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

***CERTIFIED NURSE
PRACTITIONER***

ANTONYAN, HOLLY, NPF†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LEE, ALEXANDER, NP

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-22

AWADALLA, FARAH, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
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92660

Effective as of 01-DEC-22

AWADALLA, FARAH, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
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Effective as of 01-DEC-22

BIERMAN, DINA, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
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Effective as of 01-NOV-23

BIERMAN, DINA, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE

501

NEWPORT BEACH, CA
92660

Effective as of 01-OCT-18

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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92660

Effective as of 01-APR-24

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
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92660

Effective as of 01-AUG-19

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

BREITHAUPT, ANDREW, MD†

Provider ID: N/A

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Effective as of 01-SEP-18

C1. 網絡內提供者清單 專科護理醫師

ETTEFAGH, LELIA, MD

Provider ID: N/A

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92660

Effective as of 01-JAN-21

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

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92660

Effective as of 01-FEB-23

FAZEL, NASIM, MD

Provider ID: N/A

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Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
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92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
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Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
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92660

Effective as of 01-SEP-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
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92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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92660

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FAZEL, NASIM, MD

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Effective as of 01-JAN-24

FAZEL, NASIM, MD

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Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
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Effective as of 01-MAY-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
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Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

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92660

Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

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Effective as of 01-OCT-15

C1. 網絡內提供者清單
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FOREMAN, TANYA, MD†

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Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

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Effective as of 01-JAN-17

FOWLER, VINCENT, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-20

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
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Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1441 AVOCADO AVE STE
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92660

Effective as of 01-JAN-24

HENDERSON, GREGORY, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

HENDERSON, GREGORY, MD

Provider ID: N/A

1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

KAMEL, JOSEPH, DO

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

KAMEL, JOSEPH, DO

Provider ID: N/A

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NEWPORT BEACH, CA
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Effective as of 01-MAR-24

**KARAVAN JAHROMI, MAHSA,
MD†**

Provider ID: N/A

1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
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Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†

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240 NEWPORT CENTER DR
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Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

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240 NEWPORT CENTER DR
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Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

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1401 AVOCADO AVE STE
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C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

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NEWPORT BEACH, CA
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Effective as of 01-DEC-21

LANDER, JEFFREY, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 602
NEWPORT BEACH, CA
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Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
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Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1441 AVOCADO AVE STE

806

NEWPORT BEACH, CA
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Effective as of 01-AUG-22

LANDER, JEFFREY, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
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NEWPORT BEACH, CA
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Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

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Effective as of 01-JAN-23

LANDER, JEFFREY, MD†

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Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

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LANGER, ROBERT, MD

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Effective as of 01-MAR-24

LANGER, ROBERT, MD

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LEDON, JENNIFER, MD

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LEDON, JENNIFER, MD†

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Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

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92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

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Effective as of 01-MAY-23

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LEVIN, JACQUELINE, DO†

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LEVIN, JACQUELINE, DO†

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LIEM, WIEKE, MD†

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Effective as of 01-JAN-23

LIEM, WIEKE, MD†

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Effective as of 01-JUL-19

LIEM, WIEKE, MD†

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LIEM, WIEKE, MD†

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LUCERO, RENEE, DO

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Effective as of 01-JUL-23

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-MAY-21

MARTIN, STEPHANIE, MD†

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Effective as of 01-APR-21

MESHKINPOUR, AZIN, MD†

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Effective as of 01-JAN-23

MESHKINPOUR, AZIN, MD†

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92660
Effective as of 01-JUL-19

MESHKINPOUR, AZIN, MD†

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Effective as of 01-MAY-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

NAMI, NAVID, DO†

Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

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Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-JUN-19

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-JUL-12

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
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Effective as of 01-JAN-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-12

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO†

Provider ID: N/A

360 SAN MIGUEL DR STE
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Effective as of 01-FEB-23

NAMI, NAVID, DO†

Provider ID: N/A


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C1. 網絡內提供者清單 專科護理醫師

92660
Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
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Effective as of 01-NOV-23

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-OCT-18

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

NAMI, NAVID, DO[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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Effective as of 01-APR-21

NAMI, NAVID, DO[†]


Provider ID: N/A

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Effective as of 01-APR-21

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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NEWPORT BEACH, CA
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]


Provider ID: N/A

 360 SAN MIGUEL DR STE
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Effective as of 01-FEB-23

NGUYEN, DENNIS, MD[†]

Provider ID: N/A


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C1. 網絡內提供者清單 專科護理醫師

92660
Effective as of 01-APR-21

NGUYEN, DENNIS, MD†


Provider ID: N/A

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Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

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NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

NGUYEN, DENNIS, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

SHIELL, RONALD, MD†

Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

 1441 AVOCADO AVE STE
806

C1. 網絡內提供者清單
專科護理醫師

NEWPORT BEACH, CA
92660
Teleservice
Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Teleservice
Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Teleservice
Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Teleservice
Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702

NEWPORT BEACH, CA
92660
Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-22

TRIVEDI, RADHIKA, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A

📍 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

TRIVEDI, RADHIKA, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ENDOCRINOLOGY

METABOLISM DIABETES

MOATTARI, ALI, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
502
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-20

SODHI, SANDEEP, MD†

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

SODHI, SANDEEP, MD†

Provider ID: N/A

📍 369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

SAINI, SURINDER, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

HEMATOLOGY / ONCOLOGY

PATHAK, BHAVANA, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

PATHAK, BHAVANA, MD†

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

SACHELARIÉ, IRINA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE 301

**C1. 網絡內提供者清單
專科護理醫師**

NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

***INTERVENTIONAL
CARDIOLOGY***

SARABI, DENNIS, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 610
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-21

***OBSTETRICS /
GYNECOLOGY***

AL-AZAWI, HIND, MD

Provider ID: N/A
366 SAN MIGUEL DR STE
209
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

SUGIHARA, CORINNE, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-11

SUGIHARA, CORINNE, MD†

Provider ID: N/A
1441 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-11

OPHTHALMOLOGY

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660
Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-22

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
307
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-18

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-21

CIES, WILLIAM, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 404
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-NOV-17

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-NOV-17

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA

C1. 網絡內提供者清單
專科護理醫師

92660
Effective as of 01-OCT-23

EIFRIG, CHARLES WILLIAM, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-SEP-18

GUPTA, MRINALI, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

HWANG, JOHN, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-18

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-18

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-18

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-18

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-20

HWANG, JOHN, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660

Effective as of 01-OCT-23

LIU, WENJING, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 410
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-22

LIU, WENJING, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 410
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-20

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-20

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-20

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-17

C1. 網絡內提供者清單 專科護理醫師

407
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-14

OTOLARYNGOLOGY

BERTELSEN, CAITLIN, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

WILLNER, AYAL, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-12

WILLNER, AYAL, MD†
Provider ID: N/A

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-12

PEDIATRIC PULMONOLOGY

HARRISON, AMY, MD
Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-24

HARRISON, AMY, MD
Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-24

HARRISON, AMY, MD
Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-24

HARRISON, AMY, MD
Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD†
Provider ID: N/A

1401 AVOCADO AVE STE
802
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-21

SAFER, TERRA, MD
Provider ID: N/A

360 SAN MIGUEL DR STE
105
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

KANE, KARA, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KANE, KARA, PA†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-15

KLEINSMITH, DARIN, PA†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-18

MOUNTAIN, KELLY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

MOUNTAIN, KELLY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE

806

NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

STANDEL, SARAH, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660*

Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

MERCADO, BRYANT, DPM

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706

C1. 網絡內提供者清單
專科護理醫師

NEWPORT BEACH, CA
92660
Effective as of 01-AUG-23

PSYCHOLOGIST

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

SURGERY GENERAL

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BURNS, ROBERT, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 500
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

SURGERY PLASTIC

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-JUL-12

MUDGE, BRADLEY, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

UROLOGY

AUERBACH, STEPHEN, MD

Provider ID: N/A

1401 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-19

ILBEIGI, PEDRAM, DO[†]

Provider ID: N/A

1401 AVOCADO AVE STE
608
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-19

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA

92660

Effective as of 01-JUL-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

FAMILY PRACTICE

SPORTS MEDICINE

YIM, EUGENE, MD[†]

Provider ID: N/A

21115 NEWPORT COAST DR
NEWPORT COAST, CA
92657

Effective as of 01-JAN-21

ANESTHESIOLOGY

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

ANESTHESIOLOGY PAIN MANAGEMENT

BODDU, NAVNEET, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 200
OCEANSIDE, CA 92054

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-NOV-21

COHEN, ZACHARY, MD†

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JAN-24

COHEN, ZACHARY, MD†

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

DAIRO, BRANDON, MD†

Provider ID: N/A

☒ 3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FISHER, CASEY, MD

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUN-19

FISHER, CASEY, MD

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-21

LAWSON, ERIN, MD

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

LAWSON, ERIN, MD

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-23

TOWNE, BROOKE, MD

Provider ID: N/A

☒ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

CARDIAC

ELECTROPHYSIOLOGY

PASHMFOROUSH, MOHAMMAD, MD†

Provider ID: N/A

☒ 2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

CARDIOVASCULAR DISEASE

EL SHERIEF, KARIM, MD†

Provider ID: N/A

☒ 3230 WARING CT STE O
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

KABRA, ASHISH, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 3
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SAMANI, PARGOL, MD

Provider ID: N/A

☒ 3927 WARING RD STE C
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-DEC-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Effective as of 01-SEP-23

YUNG, AARON, MD†

Provider ID: N/A

☒ 2424 VISTA WAY STE 300
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JUN-21

CERTIFIED ACUPUNCTURIST

LIPTON, GREGORY, LAC

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

701 SEAGAZE DR STE B
OCEANSIDE, CA 92054
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ANDOLINA, SARA, NP†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

BAEK, KILHYO, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-22

BALDWIN, ANDREA, NP†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

CHILAKA, SAMUEL, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHIRIBOGA, MEGAN ELISE, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-DEC-22

CHRISTY, TYLER, NPF

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CORY, ALLISON, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

EKLUND, BONNIE, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

EKLUND, BONNIE, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

FISHER-GAMEZ, LORI, NP

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

HALGEDAHL, YI, NP

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

HALGEDAHL, YI, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HALGEDAHL, YI, NP

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

HOWELL, AMANDA, NP

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-APR-24

NAVA, PETER, NP

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

☞ 4700 N RIVER RD

OCEANSIDE, CA 92057
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

QUINN, ERIN, NP

Provider ID: N/A

☞ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-21

SANTIAGO, AMANDA, NP

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-MAR-24

WAGNER, TASIA, NP

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A

☞ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A

☞ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

☞ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE, CRNM†

Provider ID: N/A

☞ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LASKY, LANA, CRNM

Provider ID: N/A

☞ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PERLMAN, TAMARA, CRNM†

Provider ID: N/A

☞ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHROEDER, MARY, NP

Provider ID: N/A

☞ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

C1. 網絡內提供者清單

專科護理醫師

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHIROPRACTOR

ANDREWS, BRAD, DC

Provider ID: N/A

☐ 619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ANGRA, KUNAL, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20

ANGRA, KUNAL, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-21

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

GILBOA, RUTH, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

LEE, HELEN, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-AUG-22

LEE, HELEN, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-NOV-22

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

☐ 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-APR-07

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

**SIRICHOTIRATANA, MELISSA,
MD†**

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-MAR-12

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-09

THIELE, JENS, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

TSE, YARDY, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

TSE, YARDY, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-13

VENKAT, ARUN, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†
Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

ENDOCRINOLOGY REPRODUCTIVE

COFFLER, MICKEY, MD†
Provider ID: N/A

3231 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FAMILY PRACTICE

DONNELL, MARTI, MD
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-NOV-23

DONNELL, MARTI, MD
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-NOV-23

C1. 網絡內提供者清單 專科護理醫師

DONNELL, MARTI, MD

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-NOV-23

MARTINEZ, LESLY, MD

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-APR-23

MARTINEZ, LESLY, MD

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-APR-23

MARTINEZ, LESLY, MD

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-APR-23

PANICKER, CIBU, MD

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-18

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Teleservice
Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054*
Teleservice
Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Teleservice
Effective as of 01-MAR-24

VIDAL, MONICA, DO†

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-AUG-22

VIDAL, MONICA, DO†

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-AUG-22

VIDAL, MONICA, DO†

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-AUG-22

FAMILY PRACTICE SPORTS MEDICINE

STARK, ERIK, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

CHIAO, HELLEN, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CHIAO, HELLEN, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-MAR-01

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

☐ 3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

C1. 網絡內提供者清單 專科護理醫師

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-DEC-07

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAD, JAVAID, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHIM, MICHAEL, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-01

**C1. 網絡內提供者清單
專科護理醫師**

***GYNECOLOGIC
ONCOLOGY***

ESKANDER, RAMEZ, MD†

Provider ID: N/A
☑ 4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

***HEMATOLOGY /
ONCOLOGY***

SINGH, HIMANI, MD†

Provider ID: N/A
☑ 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SINGH, HIMANI, MD†

Provider ID: N/A
☑ 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

INTERNAL MEDICINE

KHARADJIAN, TALAR, MD†

Provider ID: N/A
☑ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-22

KHARADJIAN, TALAR, MD†

Provider ID: N/A
☑ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A
☑ 3300 VISTA WAY STE B

OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

LIU, ANDREW, MD

Provider ID: N/A
☑ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

MACMURRAY, MICHAEL, MD

Provider ID: N/A
☑ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A
☑ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-MAY-23

PAROLY, WARREN, MD†

Provider ID: N/A
☑ 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

***INTERVENTIONAL
CARDIOLOGY***

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A
☑ 605 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

***LICENSED CLINICAL
SOCIAL WORKER***

ACOSTA, AZUCENA, LCSW

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057

Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A
☑ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A
☑ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A
☑ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-21

**DOUGHERTY, CHRISTINE,
LCSW**

Provider ID: N/A
☑ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

**DOUGHERTY, CHRISTINE,
LCSW**

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☐ 4700 N RIVER RD
OCEANSIDE, CA 92057

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

☐ 517 N HORNE ST
OCEANSIDE, CA 92054

Teleservice

Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☐ 818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

C1. 網絡內提供者清單

專科護理醫師

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD†

Provider ID: N/A

☒ 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY

KHARADJIAN, TALAR, MD†

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-21

LIU, ANDREW, MD

Provider ID: N/A

☒ 3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

LIU, ANDREW, MD

Provider ID: N/A

☒ 3300 VISTA WAY
OCEANSIDE, CA 92056*
Teleservice
Effective as of 01-OCT-23

LIU, ANDREW, MD

Provider ID: N/A

☒ 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A

☒ 4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A

☒ 3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

EBRAHIMI ADIB, TANNAZ, MD†

Provider ID: N/A

☒ 3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-19

MAZAREI, RAHELE, DO†

Provider ID: N/A

☒ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

MAZAREI, RAHELE, DO†

Provider ID: N/A

☒ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAR-20

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

☒ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

☒ 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15

SUNTAY, BERK, MD†

Provider ID: N/A

☒ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SUNTAY, BERK, MD†

Provider ID: N/A

☒ 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

OPHTHALMOLOGY

JACOBSEN, BRADLEY, MD

Provider ID: N/A

☒ 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

☒ 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

NGUYEN, VINCENT, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NGUYEN, VINCENT, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20

ROBINSON, FANE, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHEILS, CATHERINE, MD

Provider ID: N/A

3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

SMITH, MARK, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SMITH, MARK, MD†

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GEE, JENNIFER, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

GEE, JENNIFER, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

RING, ROBERT, OD†

Provider ID: N/A

☒ 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

☒ 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

OTOLARYNGOLOGY

BERRY, JULIE, MD

Provider ID: N/A

☒ 3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

CARROLL, SARAH, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

CARROLL, SARAH, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CARROLL, SARAH, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

JACOBS, ROBERT, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JACOBS, ROBERT, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KUSHNARYOV, ANTON, MD

Provider ID: N/A

☒ 3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

REISMAN, BRUCE, MD†

Provider ID: N/A

☒ 3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

PEDIATRICS

CURLEY, EDWARD, MD†

Provider ID: N/A

☒ 2210 MESA DR STE 300
OCEANSIDE, CA 92054
Effective as of 01-FEB-15

RONAN, KEVIN, MD

Provider ID: N/A

☒ 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

☒ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

FISHER, CASEY, MD

Provider ID: N/A

☒ 3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PERRIZO, NATHAN, DO

Provider ID: N/A

☒ 3998 VISTA WAY STE 108
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

BASIN, NATALIE, PA

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-APR-24

BEITTER, KEERSTIN, PA†

Provider ID: N/A
3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

BRODSKY, DENNIS, PA

Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-FEB-22

COWAN, JOHN, PA†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

GLASSER, DANIEL, PA

Provider ID: N/A
605 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PAUL, ROBERT, PA†

Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-FEB-22

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

RAMOS, ELENA, PA

Provider ID: N/A
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Effective as of 01-AUG-23

REUSCH, KEVIN, PA

Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

SKULSKY, EVA, PA†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

THOMAS, ROGER, PA

Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

WALLACE, STEPHANIE, PA

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

WRIGHT, DEREK, PA

Provider ID: N/A
3231 WARING CT STE K
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A
3231 WARING CT STE K
OCEANSIDE, CA 92056
Effective as of 01-APR-24

PODIATRIST

BOBICK, BRIAN, DPM†

Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

BOBICK, BRIAN, DPM†

Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

BROOKS, JEFFREY, DPM

Provider ID: N/A
3230 WARING CT STE M

C1. 網絡內提供者清單

專科護理醫師

OCEANSIDE, CA 92056
Effective as of 01-APR-21

HAN, JAMES, DPM

Provider ID: N/A

2119 S EL CAMINO REAL
OCEANSIDE, CA 92054
Effective as of 01-DEC-11

SHIN, HEAMIN, DPM

Provider ID: N/A

3230 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SPRINGER, DEWAIN, DPM†

Provider ID: N/A

2191 S EL CAMINO REAL
STE 101
OCEANSIDE, CA 92054
Effective as of 01-JUL-18

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103

OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PULMONARY DISEASES

CORONA, FRANK, MD

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

CORONA, FRANK, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

VISEROI, MARIUS, MD†
Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

YAMANAKA, MARK, MD
Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

RADIATION ONCOLOGY

HOOPES, DAVID, MD
Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

RASH, DOMINIQUE, MD
Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

URBANIC, JAMES, MD
Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT
Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

BOUCHARD, REID, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

BOUTELLE, BARBARA, PT
Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT
Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

DOULL, MATTHEW, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-23

FARRAR, COURTNEY, PT†
Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

FARRAR, COURTNEY, PT†
Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

GARBER, MARC, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-OCT-21

LANGIS, TANYA, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT
Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

OSORIO, SANTIAGO, PT
Provider ID: N/A

2424 VISTA WAY STE 120
OCEANSIDE, CA 92054
Effective as of 01-SEP-22

PENNINGTON, JENNIFER, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

WILSON, JENNIFER, PT
Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

RHEUMATOLOGY

BEJKO, ETELEVA, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

BRION, PAUL, MD

Provider ID: N/A

☐ 3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

SURGERY COLON SURGERY

NASSERY, KRISTEN, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

NASSERY, KRISTEN, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SURGERY GENERAL

DEEMER, ANDREW, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEEMER, ANDREW, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JAMSHIDI-NEZHAD,

MOHAMMAD, DO

Provider ID: N/A

☐ 3601 VISTA WAY STE 203

OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SEIDEN, GRANT, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

☐ 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SURGERY HAND

DAUGHERTY, DAVID, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

HARTMAN, ANDREW, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

SEIDEN, GRANT, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

SURGERY ORTHOPEDIC

AMORY, DAVID, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

DAUGHERTY, DAVID, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

KANE, NORMAN, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

STARK, ERIK, MD†

Provider ID: N/A

☐ 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

SURGERY THORACIC

WU, DARRELL, MD†

Provider ID: N/A

☐ 3156 VISTA WAY STE 100
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

C1. 網絡內提供者清單 專科護理醫師

UROLOGY

BOONJINDASUP, AARON, MD

Provider ID: N/A

☐ 3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

FRASIER, BRADLEY, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

FRASIER, BRADLEY, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

GUERENA, MICHAEL, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

GUERENA, MICHAEL, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PHILLIPS, JASON, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-15

PHILLIPS, JASON, MD†

Provider ID: N/A

☐ 3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAPIRO, ROBERT, MD

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

VILCHIS, CAROLINE, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-13

VILCHIS, CAROLINE, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VILCHIS, CAROLINE, MD†

Provider ID: N/A

☐ 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ADDO, BELINDA, NP†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-OCT-22

CHIROPRACTOR

SCHRIEFER, NOAH, DC†

Provider ID: N/A

☐ 1675 N PERRIS BLVD STE G
PERRIS, CA 92571
Effective as of 01-SEP-22

TRAINER, JASON, DC†

Provider ID: N/A

☐ 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-JUL-22

NEUROLOGY CHILD

ARCA, CHRIS, MD

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570
Effective as of 01-NOV-23

PEDIATRICS

LEE, ALAN, MD†

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

LEE, ALAN, MD†

Provider ID: N/A

☐ 215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

PREVENTATIVE MEDICINE GENERAL

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†

Provider ID: N/A

☐ 524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-JAN-21

ANESTHESIOLOGY

PRASAD, RUPA, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

ANESTHESIOLOGY PAIN MANAGEMENT

COHEN, ZACHARY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201
POWAY, CA 92064

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

☐ 15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-JAN-24

FISHER, CASEY, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
201
POWAY, CA 92064

Effective as of 01-APR-23

PRASAD, RUPA, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-21

CARDIOVASCULAR DISEASE

NANAVATI, VIMAL, MD

Provider ID: N/A

☐ 15706 POMERADO RD STE
104
POWAY, CA 92064

Effective as of 01-FEB-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☐ 15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

TRAN, DAPHNE, NP

Provider ID: N/A

☐ 15611 POMERADO RD
POWAY, CA 92064

Effective as of 01-FEB-23

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-JAN-21

CLINICAL

NEUROPSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

☐ 15721 POMERADO RD STE
300
POWAY, CA 92064

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-24

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-NOV-23

CELANO, NICHOLAS, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

CHIANG, JENNIFER, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

GONZALEZ, JOSE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

JOU, PAUL, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

LIN, SHINKO, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

SATEESH, BROOKE, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

TYAGI, ABHILASHA, MD

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

ENDOCRINOLOGY METABOLISM DIABETES

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064

Effective as of 01-DEC-22

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064

Effective as of 01-JAN-23

FAMILY PRACTICE

FLINN, SCOTT, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-JAN-21

NAJAND, SADAF, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

WHITE, KERI, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

GASTROENTEROLOGY

ZAKKO, MARAM, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEN, ANDREW, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

MANSOUR, DAVID, DO†

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-AUG-22

C1. 網絡內提供者清單 專科護理醫師

MOOLANI, UJJALA, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-MAY-23

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-JAN-23

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-JAN-21

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-SEP-22

THAPER, MOHINDERPAL, MD†

Provider ID: N/A

15611 POMERADO RD STE
575
POWAY, CA 92064

Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD†

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064

Effective as of 01-SEP-22

SERRY, ROD, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

VANICHSARN, CHRISTOPHER, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BELINSKY, MARIA, LCSW

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-MAY-23

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-JUL-22

BOISKIN, MARK, MD

Provider ID: N/A

15644 POMERADO RD STE
104
POWAY, CA 92064

Effective as of 01-JAN-24

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-JAN-16

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-NOV-23

SHAPIRO, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Teleservice

Effective as of 01-JUL-22

C1. 網絡內提供者清單
專科護理醫師

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-AUG-19

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-NOV-21

HO, GILBERT, MD

Provider ID: N/A

☒ 15708 POMERADO RD STE
N103

POWAY, CA 92064*

Effective as of 01-OCT-23

LUHAR, RIYA, DO

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-23

WANG, ANCHI, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

WANG, CHUNYANG, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-24

**OBSTETRICS /
GYNECOLOGY**

FAN, LI, MD†

Provider ID: N/A

☒ 15525 POMERADO RD STE
C1
POWAY, CA 92064*

Effective as of 01-NOV-21

OPHTHALMOLOGY

LOZIER, JEFFREY, MD†

Provider ID: N/A

☒ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

OPTOMETRIST

KIM, MICHELLE, OD

Provider ID: N/A

☒ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

**PHYSICAL MEDICINE /
REHABILITATION**

BULLOCK, ANDREW, DO†

Provider ID: N/A

☒ 15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

☒ 15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

☒ 15644 POMERADO RD STE

C1. 網絡內提供者清單 專科護理醫師

204
POWAY, CA 92064
Effective as of 01-JUL-22

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064
Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-207
POWAY, CA 92064
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ASTOURIAN, PATRICK, PA†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Teleservice
Effective as of 01-SEP-22

CAMERON, KENDALL, PA

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Teleservice
Effective as of 01-AUG-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-FEB-21

GRINDLE, SILVIA, PA†

Provider ID: N/A

13525 MIDLAND RD STE F
POWAY, CA 92064
Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Effective as of 01-JAN-21

RAHIM, ARIANNA, PA

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064
Effective as of 01-OCT-23

WEBB, SHANNON, PA

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Teleservice
Effective as of 01-MAY-23

PODIATRIST

BANKS, JAMINELLI, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064
Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S-102
POWAY, CA 92064
Effective as of 01-SEP-22

CHU, ANDREW, DPM†

Provider ID: N/A

15706 POMERADO RD STE

S-102
POWAY, CA 92064
Effective as of 01-NOV-21

HAN, KYOUNG, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064*
Effective as of 01-NOV-21

NEGRON, RICARDO, DPM

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

READ, TRENTON, DPM

Provider ID: N/A

15706 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A

15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

MODHWADIA, MAMTA, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-FEB-24

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-AUG-22

PEDERSEN, SUESAN, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-AUG-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A

13020 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-21

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-FEB-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-FEB-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

VALLEZ-BARLAM, ANDREA, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

RHEUMATOLOGY

RAO, SOUMYA, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-DEC-18

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-21

BRIED, JAMES, MD†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064

Effective as of 01-SEP-22

COHEN, BRAD, MD†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-MAR-24

PE, MARK-RALLY, MD†

Provider ID: N/A

12630 MONTE VISTA RD
STE 103
POWAY, CA 92064
Effective as of 01-SEP-22

FAMILY PRACTICE

HARDISON, CHARLES, MD†

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065*
Effective as of 01-SEP-22

WELLS, TODD, MD

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065
Effective as of 01-JUN-23

PEDIATRICS

YUNG, DORIS, MD†

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-DEC-18

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

CHIROPRACTOR

PIERSON, MICHAEL, DC

Provider ID: N/A

22411 ANTONIO PKWY STE
C215
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-18

DERMATOLOGY

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500

C1. 網絡內提供者清單

專科護理醫師

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD[†]

Provider ID: N/A

☒ 29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD[†]

Provider ID: N/A

☒ 29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD[†]

Provider ID: N/A

☒ 29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD[†]

Provider ID: N/A

☒ 29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD[†]

Provider ID: N/A

☒ 29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUN-18

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA

MARGARITA, CA 92688
Effective as of 01-JAN-23

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAR-19

LEVIN, JACQUELINE, DO[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAR-19

SHIELL, RONALD, MD[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-DEC-21

SHIELL, RONALD, MD[†]

Provider ID: N/A

☒ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-JAN-17

WANG, JAMES, MD[†]

Provider ID: N/A

☒ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD[†]

Provider ID: N/A

☒ 29833 SANTA MARGARITA
PKWY STE 100

C1. 網絡內提供者清單 專科護理醫師

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

☐ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

☐ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

☐ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

☐ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-APR-20

WANG, JAMES, MD†

Provider ID: N/A

☐ 29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-18

ENDOCRINOLOGY

METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

☐ 30511 AVENIDA DE LAS
FLORES
1064
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

HAMIDI, AFSHIN, MD

Provider ID: N/A

☐ 30511 AVENIDA DE LAS
FLORES
1064
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

INTERNAL MEDICINE

GORE, GWENDOLYN, MD†

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-MAY-12

GORE, GWENDOLYN, MD†

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-FEB-13

PHYSICIANS ASSISTANT

KANE, KARA, PA†

Provider ID: N/A

☐ 22032 EL PASEO STE 220

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-22

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-APR-11

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAY-12

C1. 網絡內提供者清單 專科護理醫師

ANGAROLA, JEFF, DPM

Provider ID: N/A

☐ 29472 AVENIDA DE LAS BANDERA
RANCHO SANTA MARGARITA, CA 92688

Effective as of 01-MAY-12

ANESTHESIOLOGY PAIN MANAGEMENT

MAASUMI, KASRA, MD

Provider ID: N/A

☐ 30212 TOMAS STE 180
RANCHO STA MARG, CA 92688

Teleservice

Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A

☐ 30212 TOMAS STE 180
RANCHO STA MARG, CA 92688

Teleservice

Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A

☐ 30212 TOMAS STE 180
RANCHO STA MARG, CA 92688

Teleservice

Effective as of 01-FEB-24

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

☐ 665 CAMINO DE LOS MARES STE 201
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BETTS, ANDRES, MD†

Provider ID: N/A

☐ 665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A

☐ 665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A

☐ 665 CAMINO DE LOS MARES STE 202
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-19

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

☐ 647 CAMINO DE LOS MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-20

CARDIAC

C1. 網絡內提供者清單
專科護理醫師

ELECTROPHYSIOLOGY

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-24

***CARDIOVASCULAR
DISEASE***

KUO, ALLEN, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

***CERTIFIED NURSE
PRACTITIONER***

PARK, SE, NP

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JUL-23

POLIZZI, BRITTANY, NP[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

WONG, KRYSTLE, NP

Provider ID: N/A

1031 AVENIDA PICO STE
203

SAN CLEMENTE, CA 92673
Effective as of 01-NOV-23

CHIROPRACTOR

THOMPSON, RUSSELL, DC[†]

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 104
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

DERMATOLOGY

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA

HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-22

CARLIN, CHRISTOPHER, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

FOREMAN, TANYA, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-18

C1. 網絡內提供者清單 專科護理醫師

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Teleservice

Effective as of 01-MAR-19

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Teleservice

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Teleservice

Effective as of 01-OCT-23

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD†

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

GUJRAL, NAVJYOT, MD†

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

HASSANEIN, TAREK, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-22

HASSANEIN, TAREK, MD†
Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

HASSANEIN, TAREK, MD†
Provider ID: N/A

675 CAMINO LOS MARES
210
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

ROSSARO, LORENZO, MD†
Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-22

ROSSARO, LORENZO, MD†
Provider ID: N/A

675 CAMINO DE LOS
MARES STE 210
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

INTERVENTIONAL CARDIOLOGY

DRURY, PAUL, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†
Provider ID: N/A

724 S EL CAMINO REAL

SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

DRURY, PAUL, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-19

DRURY, PAUL, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

KUO, ALLEN, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

VAN, HO HAI, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

VAN, HO HAI, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HO HAI, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HO HAI, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

NEUROLOGY

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS
MARES STE D4

C1. 網絡內提供者清單
專科護理醫師

SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

***OBSTETRICS /
GYNECOLOGY***

BAILEY, THOMAS, MD†

Provider ID: N/A

📍 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-MAR-01

BAILEY, THOMAS, MD†

Provider ID: N/A

📍 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-18

JOHNSON, SUSAN, MD†

Provider ID: N/A

📍 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22

JOHNSON, SUSAN, MD†

Provider ID: N/A

📍 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

JOHNSON, SUSAN, MD†

Provider ID: N/A

📍 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-20

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

📍 1031 AVENIDA PICO STE
204

SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

RAMIREZ, SARA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-10

RAMIREZ, SARA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

📍 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

📍 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

DHOOT, SONIA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

📍 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

GWYNN, DAVID, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

GWYNN, DAVID, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-24

GWYNN, DAVID, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103

SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

☐ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

☐ 653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

☐ 653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

JOSON, PETER, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS

C1. 網絡內提供者清單

專科護理醫師

MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-10

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-15

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

KELLER, CHARLES, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22

NOGUCHI, JONATHAN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUN-21

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-22

WANG, YE, MD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-19

OPTOMETRIST

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102

SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-19

CHOI-SIRITARATIWAT, ISABELL, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-JUN-19

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

NG, REBECCA, OD†

Provider ID: N/A

☞ 653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-11

NG, REBECCA, OD†

Provider ID: N/A

☞ 653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

NG, REBECCA, OD

Provider ID: N/A

☞ 653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-23

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

STEFANIDIS, NICOLETTA, OD†

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

TERADA, SEIJU, OD

Provider ID: N/A

☞ 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-22

TERADA, SEIJU, OD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-14

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-08

WELLS, PHILLIP, MD†

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-20

MOHALE, SHARON, PA†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-18

NELMS, MICHAEL, PA†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-21

NORMAN, STACY, PA

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-NOV-22

WANG, ALICE, PA

Provider ID: N/A

831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

☐ 655 CAMINO DE LOS
MARES STE 120
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-FEB-24

SURGERY HAND

FRANKLIN, ADAM, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-APR-18

FRANKLIN, ADAM, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-APR-18

SURGERY

NEUROLOGICAL

PATEL, HITESH, MD†

Provider ID: N/A

☐ 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-21

SURGERY ORTHOPEDIC

GIALAMAS, GUS, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

GIALAMAS, GUS, MD

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109

SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

VAN DER REIS, WILLIAM, MD†

Provider ID: N/A

☐ 653 CAMINO DE LOS
MARES STE 109
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

UROLOGY

BUI, DON, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

BUI, DON, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-23

BUI, DON, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

HO, TAMMY, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

RANDALL, JOSH, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SINGH, KARAN, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SPITZ, AARON, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SU, DANIEL, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

☐ 3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

ADDICTIVE MEDICINE

HEINRICI, ALEKA, MD

Provider ID: N/A

☐ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-APR-23

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A

☐ 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A

☐ 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD†

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A

☐ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD

Provider ID: N/A

☐ 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HOAGLAND, PETER, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108
Effective as of 01-APR-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

ALKATIB, RHONDA, MD†

Provider ID: N/A

☐ 2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

COHEN, GARY, MD

Provider ID: N/A

☐ 9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121
Effective as of 01-OCT-95

COHEN, GARY, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121
Effective as of 01-FEB-07

KIM, ALEXANDER, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-20

OSTROM, NANCY, MD†

Provider ID: N/A

5776 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-JAN-13

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JAN-21

SHARMA, KUSUM, MD

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-SEP-15

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CHIEN, SHELBY, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

DOBECKI, DOUGLAS, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-22

FILIPOVIC, MAYA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

GAYAM, SAJJAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

GROVEY, BRITTANY, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, GEMAYEL, MD†

Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

NARLA, VINOD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ROY, KEVIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SAID, ENGY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SAID, ENGY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

SUYDAM, STEVEN, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

THOMPSON, SANDRA, MD†

Provider ID: N/A
4033 3RD AVE STE 200
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

TOLIVER, KEVIN, MD

Provider ID: N/A
4060 4TH AVE STE 408
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TULLY, JEFFREY, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VAUGHN, DOUGLAS, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-APR-24

CHISHOLM, CHRISTOPHER, MD

Provider ID: N/A
16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-JUN-20

CHONG, TIMOTHY, MD†

Provider ID: N/A
16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-SEP-17

COHEN, ZACHARY, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DAIRO, BRANDON, MD†

Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

GROVEY, BRITTANY, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104

SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†

Provider ID: N/A
8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, INSUN, MD

Provider ID: N/A
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-APR-24

RICHARDSON, HENRY, MD†

Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAY-21

THOMPSON, SANDRA, MD†

Provider ID: N/A
4033 3RD AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

VAN NOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VAN NOORD, BRANDON, MD†

Provider ID: N/A
3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

C1. 網絡內提供者清單 專科護理醫師

VAN NOORD, BRANDON, MD[†]

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HERRERA, CHARITY, AuD[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HORNER, HEATHER, AuD[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-22

HORNER, HEATHER, AuD[†]

Provider ID: N/A

📍 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Teleservice

Effective as of 01-JUN-22

SHASKY, GARY, AuD[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SILVERSTEIN, KAYLI, AuD

Provider ID: N/A

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-APR-24

TSANG, JOYCE, AuD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD[†]

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CARDIAC

ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD[†]

Provider ID: N/A

📍 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CHOI, ANTHONY, MD

Provider ID: N/A

📍 3131 BERGER AVE
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

LENER, JONATHAN, MD

Provider ID: N/A

📍 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

LENER, JONATHAN, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JUL-23

MAI, TUAN, MD[†]

Provider ID: N/A

📍 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MAI, TUAN, MD[†]

Provider ID: N/A

📍 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

PATEL, JIGAR, DO[†]

Provider ID: N/A

📍 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-23

PATEL, JIGAR, DO[†]

Provider ID: N/A

📍 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

SHAH, ABHISHEK, MD[†]

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD

Provider ID: N/A

☐ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

WADHWA, MANISH, MD†

Provider ID: N/A

☐ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

☐ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

ABELHAD, NADIA, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-24

BHATT, JIKEN, MD

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

CARAZO, MATTHEW, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

CHUNG, KIYON, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-16

COX, JUSTIN, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

DIGGS, THOMAS, MD†

Provider ID: N/A

☐ 501 WASHINGTON ST STE
512

SAN DIEGO, CA 92103
Effective as of 01-JAN-14

DO, HULBERT, MD

Provider ID: N/A

☐ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-OCT-23

DURAN, EDWARD, MD

Provider ID: N/A

☐ 2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

GARIBYAN, VARTAN, DO†

Provider ID: N/A

☐ 4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

C1. 網絡內提供者清單 專科護理醫師

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAV, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

HOURANI, RAYAN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

KHAN, HASHIM, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-21

KIMURA, BRUCE, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-NOV-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

16776 BERNARDO CENTER
DR STE 209
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-FEB-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-AUG-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-21

NARULA, ARVIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE

C1. 網絡內提供者清單 專科護理醫師

512
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

NAYAK, KESHAV, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-19

NGUYEN, TRI, MD†

Provider ID: N/A

☒ 4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-23

NISHIMURA, MARIN, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

PATEL, JIGAR, DO

Provider ID: N/A

☒ 4060 FOURTH AVENUE,
STE 650
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

PROHASKA, THOMAS, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SALAMI, ALI, MD†

Provider ID: N/A

☒ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

SARSAM, LUAY, MD

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-FEB-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

☒ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

WILLIAMS, JEFFREY, MD

Provider ID: N/A

☒ 4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

☒ 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

CERTIFIED

**C1. 網絡內提供者清單
專科護理醫師**

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

CALLISON, YANHUI, LAC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CALLISON, YANHUI, LAC

Provider ID: N/A

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

JULIAN, FIDES, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice

Effective as of 01-SEP-21

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

MURRAY, STEVEN, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

9333 GENESEE AVE STE 220
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

NOVAK, ERIKA, LAC

Provider ID: N/A

3282 GOVERNOR DR
SAN DIEGO, CA 92122

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129

Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

330 LEWIS ST

SAN DIEGO, CA 92103

Effective as of 01-DEC-21

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA, NP

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

AMOS, MARIA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ANTHONY, SHARON, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103*

Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BILOTTA, NATALIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

BINAVI, HOWNAZ, NP†

Provider ID: N/A

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BUI, ANH, NPF

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-NOV-23

BURNEY, BRAEANNE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

8010 FROST ST STE 510

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A
☒ 8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A
☒ 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

CARDENAS, MIRIAM, NPF

Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF

Provider ID: N/A
☒ 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP

Provider ID: N/A
☒ 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CELESTIN-RAMSEY, AKANKE, NPF

Provider ID: N/A
☒ 950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice

Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†

Provider ID: N/A
☒ 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHEN, KATIE, NP

Provider ID: N/A
☒ 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†

Provider ID: N/A
☒ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

CHRISMAN, JESSICA, NP

Provider ID: N/A
☒ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

COLEMAN, PAGE, NP

Provider ID: N/A
☒ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-24

CONNER, PAMELA, NP

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†

Provider ID: N/A
☒ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUN-21

CUTLER, APRYL, NP

Provider ID: N/A
☒ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DE DIOS, SARAH, NP

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DE LARA, KAROL JOHN, NP

Provider ID: N/A
☒ 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DHARKAR SURBER, SAPNA, NP
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DHARKAR SURBER, SAPNA, NP
Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DILLEN, REBECCA, NP
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DOAN, ANGELA, NP†
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DOAN, ANGELA, NP†
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP
Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-OCT-23

DWYER, ERIN, NP
Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DWYER, ERIN, NP
Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DWYER, ERIN, NP†
Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DWYER, ERIN, NP†
Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DWYER, ERIN, NP
Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

ERICKSON, LISA, NP†
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

ERICKSON, LISA, NP†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

FEIZI, SEDI, NP†
Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

FEROLIE, PAM, NP
Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Effective as of 01-DEC-23

FILIPPELLO, LAUREN, NPF
Provider ID: N/A

3863 CLAIREMONT DR
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-OCT-23

GIORGI, ASHLEY, NP
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

GIORGI, ASHLEY, NP
Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

C1. 網絡內提供者清單

專科護理醫師

GOMEZ, LESLIE, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GONZALEZ, LISA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

GORDON, DANIELLE, NP†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

HA, THU, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HA, THU, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HALE, EMILY, NPF

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-23

HARVEY, DELFINA, NP

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HILL, GENIELYN, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

HOOPER, BONNIE, NP†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HORNFELD, COURTNEY, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

INSTONE, SUSAN, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

INSTONE, SUSAN, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

JENKINS, ERIN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP

Provider ID: N/A


350 DICKINSON ST

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92103
Effective as of 01-APR-23


JONES, CHRISTA, NP

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


JONES, CHRISTA, NP†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21


KAHL, NICHOLAS, NP

Provider ID: N/A

 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21


KELLEY, JESSICA, NP

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24


KI, TRISH, NP†

Provider ID: N/A

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KYI, MYA, NP

Provider ID: N/A


 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-MAR-24


LEE, MINDY, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


LEE, MINDY, NP

Provider ID: N/A

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


LEE, MINDY, NP

Provider ID: N/A

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23


MADGEDI, SHEILA, NP†

Provider ID: N/A

 4282 GENESEE AVE STE
204
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-JUL-21


MANZANO, EUNICE, NP†

Provider ID: N/A

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

MANZANO, EUNICE, NP†

Provider ID: N/A

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

MAROSOK, MICHELLE, NP

Provider ID: N/A

 16918 DOVE CANYON RD

STE 103


SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-23

MAROSOK, MICHELLE, NP


Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice

Effective as of 01-MAR-24


MARTINEZ, CAROLYN, NP

Provider ID: N/A

 1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-AUG-22


MAYOYO, MARILYNN, NP

Provider ID: N/A

 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-23


MCCLAIN, MEGAN, NP†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22


MCGILLOWAY, MELANIE, NP†

Provider ID: N/A

 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MCGOWAN, GLAIZA ANN, NP

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEDILO, LOVELLA, NP

Provider ID: N/A

☒ 4033 3RD AVE STE 200
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

MEDINA, RUBELETA, NP

Provider ID: N/A

☒ 9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129
Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP†

Provider ID: N/A

☒ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

MEYER, ISAAC, NP

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MEYER, ISAAC, NP

Provider ID: N/A

☒ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

MICK, SHARON, NP

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

NAGATA, CERAH, NP

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

NAGATA, CERAH, NP

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP†

Provider ID: N/A

☒ 9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

☒ 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP

Provider ID: N/A

☒ 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP†

Provider ID: N/A

☒ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NOCEDA, ANA, NP†

Provider ID: N/A

☒ 4305 UNIVERSITY AVE STE
150

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92105
Effective as of 01-SEP-22

OREJEL, EDITH, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

OREJEL, EDITH, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

ORPILLA, IMELDA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

ORPILLA, IMELDA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-21

PACE, RACHELLE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

PATIAG, DANIEL, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATIAG, DANIEL, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PEREZ, ALLYSSA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

PEREZ, ALLYSSA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PETTIS, BETH, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JUN-22

POVOLI, LAUREN, NPF

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-APR-24

RADMAN, MIRKA, NP

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-AUG-23

RAJAEI, NILOUFAR, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

REAL, MARIA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REAL, MARIA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

REDDY, PRIYA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-22

REGEV, SHANEE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

REGEV, SHANEE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-APR-23

REINER, GAIL, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-OCT-21

REINER, GAIL, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RENZAS, JENNIFER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

ROBERTSON, RACHAEL, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

RODENMEYER, EVE, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

RODENMEYER, EVE, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

ROZO, JOSE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUFO, ROSAVIDA, NP

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Effective as of 01-JUN-23

SABIN, NANCY, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

SANADA, VIVIANE, NP

Provider ID: N/A

995 GATEWAY CENTER

C1. 網絡內提供者清單 專科護理醫師

WAY STE 202
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-APR-24

SANTANGELO, JOANNE, NP

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SANTANGELO, JOANNE, NP

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SCOTT, KELLY, NP

Provider ID: N/A
2630 1ST AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

SEARS-WILEY, ELIZABETH, NP†

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SHARMA, RAKHI, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SIETSMA, ALEXANDRA, NP†

Provider ID: N/A
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SMITH, JENNIFER, NP†

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SNYDER, KIRSTIN, NP

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SOLOMON, AMANDA, NP

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SOLOMON, AMANDA, NP

Provider ID: N/A
16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127
Effective as of 01-JUN-23

SPAULDING, ENJOLI, NP

Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-23

SPAULDING, ENJOLI, NP

Provider ID: N/A
6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

STAHL, STEPHANIE, NP†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

STEFFENSMEIER, CHRISTA, NP

Provider ID: N/A
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

SUHIR, ERIN, NP

Provider ID: N/A
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

SWEENEY, ZSA ZSA, NP

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

TEJADA BRAS, SANDY, NP

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

📍 2929 HEALTH CENTER DR
SAN DIEGO, CA 92123*
Effective as of 01-JUL-22

TILLEY, MONICA, NPF

Provider ID: N/A

📍 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TOPIK, AMANDA, NP†

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOPIK, AMANDA, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOWNS, ARTA, NP

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TOWNS, ARTA, NP

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TRAN, DAPHNE, NP

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

VILLALOBOS, REBECA, NP†

Provider ID: N/A

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
Effective as of 01-DEC-22

VILLALOBOS, REBECA, NP†

Provider ID: N/A

📍 823 GATEWAY CENTER
WAY
SAN DIEGO, CA 92102
Effective as of 01-DEC-22

VILLANUEVA DE GUTIE, BERENICE, NP

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

WIETZKE, MATTHEW, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WONG, MAYBELLE, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-24

WONG, MAYBELLE, NP

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WOO, ANDY, NP

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP

Provider ID: N/A

☞ 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

YEO, ALEXANDRIA, NP

Provider ID: N/A

☞ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CERTIFIED REGISTERED NURSE ANESTHETIST

AMADOR, LINDSAY, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COLE, JASON, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DULAY, JOTI, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

EVANS, CATHERINE, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VINCENT, BERLIN, CRNA†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHOI, NATHALIE, CRNM
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM
Provider ID: N/A

7910 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM
Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

CORTES, CHRISTINE, CRNM†
Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

EKHOLM, JANNA, CRNM†
Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

GUNTHER, HOPE, CRNM†
Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-OCT-23

NATHAN, CARLY, CRNM

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

NATHAN, CARLY, CRNM

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

PERDION, KAREN, CRNM†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

RAY, BROOKE, CRNM†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

STRAUSS, JOANNA E, CRNM

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

CHIROPRACTOR

C1. 網絡內提供者清單 專科護理醫師

ASSADIAN, MEHRAK, DC

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

BEATTY, ZACHARY, DC

Provider ID: N/A

1501 IMPERIAL AVE
SAN DIEGO, CA 92101*
Effective as of 01-JUL-22

CABALLERO, JAMES, DC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Effective as of 01-NOV-23

CABALLERO, JAMES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-NOV-23

CASTRO, DAVID, DC†

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-AUG-22

DORADO, SUE, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

LE, BRANDON, DC

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

LE, BRANDON, DC

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LOVERN, JENNIFER, DC

Provider ID: N/A

2630 1ST AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-24

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUU, DANIEL, DC†

Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

ROSENBERG, ERIK, DC

Provider ID: N/A

7612 LINDA VISTA RD STE
109
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

SU, VENNES, DC

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-OCT-23

DERMATOLOGY

AHLUWALIA, JUSLEEN, MD

Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-DEC-20

ANGRA, KUNAL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

ANGRA, KUNAL, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

ANGRA, KUNAL, MD†

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

BOEN, MONICA, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BOEN, MONICA, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAR-20

BOEN, MONICA, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOEN, MONICA, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BRADSHAW, MICHAEL, MD

Provider ID: N/A

☞ 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JUL-16

BRAUN, TARA, MD

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-NOV-23

BROUHA, BROOK, MD

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

BROUHA, BROOK, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BROUHA, BROOK, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JUN-18

BROUHA, BROOK, MD†

Provider ID: N/A

☞ 9339 GENESEE AVE STE

350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

CALAME, ANTOANELLA, MD†

Provider ID: N/A

☞ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-22

CHEN, BRYAN, MD

Provider ID: N/A

☞ 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131*

Effective as of 01-JUL-16

CHEN, BRYAN, MD

Provider ID: N/A

☞ 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JUL-16

DELA ROSA, KRISTINA, MD

Provider ID: N/A

☞ 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-AUG-17

DELA ROSA, KRISTINA, MD

Provider ID: N/A

☞ 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

Effective as of 01-JAN-18

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

☞ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD

Provider ID: N/A

☞ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-21

GLADSJO, JULIE, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-DEC-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-NOV-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

HAN, AMY, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120

Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HIGHTOWER, GEORGE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-MAR-23

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-JUL-23

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117

Effective as of 01-JAN-21

KAUNITZ, GENEVIEVE, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Effective as of 01-OCT-21

KEEL, DOUGLAS, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 150
SAN DIEGO, CA 92122

Effective as of 01-JAN-21

LEE, MICHAEL, MD

Provider ID: N/A

3965 5TH AVE STE 200
SAN DIEGO, CA 92103

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-22

LUPTON, JASON, MD

Provider ID: N/A

12395 EL CAMINO REAL
STE 207

SAN DIEGO, CA 92130

Effective as of 01-MAR-16

LYFORD, WILLIS, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAY-23

MAFONG, ERICK, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

6386 ALVARADO CT STE
209

SAN DIEGO, CA 92120

Effective as of 01-FEB-22

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200

SAN DIEGO, CA 92123

Effective as of 01-JAN-23

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

PELLE, MICHELLE, MD†

Provider ID: N/A

3965 5TH AVE STE 200
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

REED, KELLY, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-MAR-20

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-NOV-23

SCHMIEDECKE, RUDY, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-23

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201

SAN DIEGO, CA 92130

Effective as of 01-JAN-23

C1. 網絡內提供者清單 專科護理醫師

SOON, SEAVER, MD

Provider ID: N/A

☒ 3737 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

☒ 6280 JACKSON DR STE 8
SAN DIEGO, CA 92119
Effective as of 01-SEP-22

TOMPKINS, STACY, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

TOMPKINS, STACY, MD†

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TSE, YARDY, MD†

Provider ID: N/A

☒ 4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130

Effective as of 01-SEP-22

TSE, YARDY, MD†

Provider ID: N/A

☒ 4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-21

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-APR-20

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZALESKI LARSEN, LISA, DO†

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZUBAIR, RAHEEL, MD

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

☒ 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121*
Effective as of 01-NOV-23

DERMATOLOGY

DERMATOPATHOLOGY

CALAME, ANTOANELLA, MD†

Provider ID: N/A

☒ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SHEN, HONGGANG, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-19

EMERGENCY MEDICINE

ALKATIB, RHONDA, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108
Effective as of 01-AUG-20

CASTELLANO, TIFFANY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHEN, ALICE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

COYNE, CHRISTOPHER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DICKSON, MATTHEW, DO†

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

GUEFEN, URI, MD

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-SEP-23

HARE, MARC, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

HARRELL-BURDER, BEVERLY, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

HOGUE, BRENNAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JURKOWSKI, LEONARD, MD†

Provider ID: N/A

3830 VALLEY CENTRE DR
STE 702
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KUTZ, CRAIG, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

MUELLER, MATTHEW, DO†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

PARK, JAY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

YU, ELAINE, DO

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

FIRST, BRIAN, MD†

Provider ID: N/A

4282 GENESEE AVE STE
103
SAN DIEGO, CA 92117
Effective as of 01-JAN-14

GUERIN, CHRIS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

HOSEIN, NADEEN, MD

Provider ID: N/A

4077 5TH AVE STE 35
SAN DIEGO, CA 92103
Effective as of 01-FEB-23

IYENGAR, RAVI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGELBERG, JODI, MD†
Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

SANDLER, JEFFREY, MD
Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SANDLER, JEFFREY, MD
Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SANDLER, JEFFREY, MD
Provider ID: N/A

4060 4TH AVE STE 340

SAN DIEGO, CA 92103
Effective as of 01-OCT-23

SHAH, NANDI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

STRAHM, LISA, MD†

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

ENDOCRINOLOGY

REPRODUCTIVE

DANESHMAND, SAID, MD

Provider ID: N/A

11515 EL CAMINO REAL STE
100
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

FOYOUZI-YOUSEFI,

NASTARAN, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-JUN-23

FRIEDMAN, BROOKE, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

FAMILY PRACTICE

**ALVAREZ-ESTRADA, MIGUEL,
MD†**

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-SEP-23

BERNADETT, ALEX, MD†

Provider ID: N/A

10505 SORRENTO VALLEY
RD STE 200
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

BERNADETT, ALEX, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2100
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

DENYSIAK, JACQUELINE, MD†

Provider ID: N/A

3969 4TH AVE STE 203
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-DEC-20

HILL, LINDA, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HILL, LINDA, MD[†]

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

KUROSAKA, MOMO, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD[†]

Provider ID: N/A

8899 UNIVERSITY CENTER

LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

LYNCH, SHAUNA, DO

Provider ID: N/A

1075 CAMINO DEL RIO S
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

MARSTON, JACQUELINE, DO

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PERESS, LILIA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

1685 HOLLISTER ST
SAN DIEGO, CA 92154*
Effective as of 01-NOV-23

SHEKER-DICKSON, KIMBERLY, DO[†]

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

SOPHY, ELIZABETH, MD[†]

Provider ID: N/A

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Effective as of 01-SEP-22

SUMMERS-DAY, COURTNEY, MD[†]

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT, MD[†]

Provider ID: N/A

9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

FAMILY PRACTICE SPORTS MEDICINE

UDOWENKO, MARINA, DO

Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Effective as of 01-JUN-23

GASTROENTEROLOGY

CHANDRADAS, SAJIV, MD[†]

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JUL-17

CUBAS, IVAN, MD[†]

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUBAS, IVAN, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-15

CUBAS, IVAN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CUMMINS, ANDREW, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JAN-15

DESTA, TADDESE, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

DESTA, TADDESE, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

DESTA, TADDESE, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-24

DESTA, TADDESE, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-14

DUBOIS, SUJA, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

FICK, DARYL, MD

Provider ID: N/A

☐ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

GADDIPATI, KISHORE, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

GISH, ROBERT, MD†

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

GISH, ROBERT, MD†

Provider ID: N/A

☐ 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

HASAN, AWS, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HASSANEIN, TAREK, MD†

Provider ID: N/A

☐ 995 GATEWAY CENTER
WAY STE 105
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

HUA, MENG, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2306

SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MITTAL, YASH, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

NOVO, MEGAN, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-23

REDDY, JOSEPH, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JUL-22

REDDY, JOSEPH, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

REDDY, JOSEPH, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92120
Effective as of 01-AUG-20

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-APR-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

SHAFFER, KATHERINE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-OCT-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAR-19

SHAFFER, KATHERINE, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SHAH, SHAILJA, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SHAH, SHAILJA, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

SHPANER, ALEXANDER, MD†

Provider ID: N/A

☒ 6719 ALVARADO RD STE
206

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

STIPHO, SALLY, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

SYAL, GAURAV, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SYAL, GAURAV, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

THOMAS, CARLTON, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

THOMAS, CARLTON, MD†

Provider ID: N/A

☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

THOMAS, CARLTON, MD†

Provider ID: N/A

☒ 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-MAR-16

YOUSSEF, FADY, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GENERAL PRACTICE

NGUYEN, HUONG, MD†

Provider ID: N/A

☒ 4444 EL CAJON BLVD STE
6

SAN DIEGO, CA 92115*

Effective as of 01-APR-21

RECALDE, FRANCISCO, MD†

Provider ID: N/A

☒ 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Effective as of 01-JAN-21

GENETIC COUNSELOR

FOYOUZI-YOUSEFI,

NASTARAN, MD

Provider ID: N/A

☒ 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE

C1. 網絡內提供者清單 專科護理醫師

200
SAN DIEGO, CA 92121
Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

BAHADOR, AFSHIN, MD

Provider ID: N/A

📍 5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

📍 5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-MAY-23

NYAKUDARIKA, NATSAI, MD

Provider ID: N/A

📍 5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-JUL-23

GYNECOLOGY

WILLIAMS, ALISA, MD[†]

Provider ID: N/A

📍 5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120
Effective as of 01-JAN-20

HEARING AID DEALER / SUPPLIER

ANAYA, MANUEL, MA[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

📍 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA[†]

Provider ID: N/A

📍 6367 ALVARADO CT
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

DANDURAND, JOHN, MA[†]

Provider ID: N/A

📍 6367 ALVARADO CT
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JAN-21

DANDURAND, JOHN, MA[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-22

DAVIS, KELLE, MA[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A

📍 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

DAVIS, KELLE, MA[†]

Provider ID: N/A

📍 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

HEMATOLOGY / ONCOLOGY

AHMED, SYED, MD

Provider ID: N/A

📍 7432 LA MANTANZA
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

📍 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

📍 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

BASERI, BABAK, MD[†]

Provider ID: N/A

📍 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

BASERI, BABAK, MD[†]

Provider ID: N/A

📍 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

BASERI, BABAK, MD[†]

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-APR-24

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

CHEN, YU-WEI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COGGAN, JAMES, DO

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123

Effective as of 01-DEC-08

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

MARJON, PHILIP, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

MESLEH SHAYEB, AKRAM, MD†

Provider ID: N/A

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

NAIDZIONAK, ULADZISLAU, MD†

Provider ID: N/A

7930 FROST ST STE 405
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

NGUYEN, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

PARSI, HOOMAN, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

QUINN, CATHERINE, MD

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-23

RAZZAQUE, SAQIB, MD

Provider ID: N/A

7377 VIA CRESTA RD
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

C1. 網絡內提供者清單 專科護理醫師

RICE, KRISTEN, MD[†]

Provider ID: N/A

☒ 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JUN-11

SARWARI, NAWID, MD

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SHAIKH, ANWER, MD[†]

Provider ID: N/A

☒ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHENOY, CASIE, MD[†]

Provider ID: N/A

☒ 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

SHIEH, MARIE, MD[†]

Provider ID: N/A

☒ 3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-16

SULLIVAN, JESSICA, DO

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, JESSICA, DO

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD[†]

Provider ID: N/A

☒ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD[†]

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

HOSPITALIST MD/DO

DJEKIC, KRISTINA, DO[†]

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

FIRESTEIN, CATHERINE, MD[†]

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD[†]

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SHINDO, YURI, MD[†]

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

YANG, BENJAMIN, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

C1. 網絡內提供者清單 專科護理醫師

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†

Provider ID: N/A

2333 1ST AVE STE 104
SAN DIEGO, CA 92101
Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

MARTIN, THOMAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

MARTIN, THOMAS, MD†

Provider ID: N/A

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

RAMIREZ SANCHEZ, CLAUDIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

INTERNAL MEDICINE

AIZIN, VITALI, MD

Provider ID: N/A

3802 NATIONAL AVE
SAN DIEGO, CA 92113*

Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

BALL, SHELDON, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BALL, SHELDON, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

CHAU, JOHN, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHAU, JOHN, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103*
Effective as of 01-NOV-12

CSAPOCZI, PETER, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GELBERG, ANNA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

HASTIE, ELIZABETH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

JAIN, SUPRABHA, MD

Provider ID: N/A

6496 WEATHERS PL STE

100

SAN DIEGO, CA 92121

Teleservice

Effective as of 01-OCT-22

JIANG, JUN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KATSNELSON, MARCELLA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KOOKOOTSEDES, GAYLE, MD†

Provider ID: N/A

3633 CAMINO DEL RIO S
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAR-21

LAMANTIA, MICHELE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-AUG-17

LIU, ANDREW, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-20

NGUYEN, TRI, MD†

Provider ID: N/A

4206 44TH ST

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92115*
Teleservice
Effective as of 01-SEP-22

NOKES, BRANDON, MD†

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†

Provider ID: N/A
☑ 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

SONG, ALEXANDER, MD

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

TANTISIRA, LALITA, MD†

Provider ID: N/A
☑ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†

Provider ID: N/A
☑ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A
☑ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YANG, JENNY, MD†

Provider ID: N/A
☑ 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A
☑ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A
☑ 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JAFFE, GILAD, MD

Provider ID: N/A
☑ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A
☑ 3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-19

SULLIVAN, LAUREN, MD

Provider ID: N/A
☑ 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A
☑ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

CARAMBAS, CLARITA, MD†

Provider ID: N/A
☑ 9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

☐ 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

☐ 3131 BERGER AVE STE 200

SAN DIEGO, CA 92123

Effective as of 01-MAR-13

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

☐ 7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

JOHN, ALAN, MD

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NARAYANAN, MEENA, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

NGUYEN, BRYANT, MD†

Provider ID: N/A

☐ 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

NGUYEN, TRI, MD†

Provider ID: N/A

☐ 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111*
Teleservice

Effective as of 01-JAN-21

PITT, WILLIAM, MD†

Provider ID: N/A

☐ 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

☐ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-DEC-22

SALAMI, ALI, MD†

Provider ID: N/A

☐ 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SCLAR, CRAIG, MD

Provider ID: N/A

☐ 3880 MURPHY CANYON
RD STE 120
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-DEC-23

SCLAR, CRAIG, MD

Provider ID: N/A

☐ 3880 MURPHY CANYON
RD STE 120

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCLAR, CRAIG, MD

Provider ID: N/A
☑ 7830 CLAIREMONT MESA
BLVD STE 100
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

SCOTT, EMILY, MD†

Provider ID: N/A
☑ 4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-NOV-12

SHAH, KULIN, MD†

Provider ID: N/A
☑ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A
☑ 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A
☑ 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A
☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

BASHAM, CLAUDIA, LCSW

Provider ID: N/A
☑ 3025 BEYER BLVD STE E101
SAN DIEGO, CA 92154
Teleservice
Effective as of 01-NOV-21

BIGGER, ALAINA, LCSW

Provider ID: N/A
☑ 4849 RONSON CT STE 207
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

BROWN, EDEN, LCSW†

Provider ID: N/A
☑ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

DIAZ, JAENAI, LCSW

Provider ID: N/A
☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DSOUZA, NICOLE, LCSW†

Provider ID: N/A
☑ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ESCAMILLA, KARLA, LCSW†

Provider ID: N/A
☑ 950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-DEC-21

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A
☑ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

HAMM, DEANNA, LCSW

Provider ID: N/A
☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A
☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

KHAMISA, SORAIYA, LCSW

Provider ID: N/A
☑ 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

LOWE, LINDSAY, LCSW

Provider ID: N/A
☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

RABBAN, DIANA, LCSW

Provider ID: N/A
☑ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-NOV-22

SACHS, MELISSA, LCSW†

Provider ID: N/A
☑ 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAR-21

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-DEC-22

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

WEAVER, MARINEL, LCSW†

Provider ID: N/A

☐ 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-DEC-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

☐ 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

Effective as of 01-JAN-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

☐ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

MARRIAGE FAMILY THERAPIST

GULOTTA, SAMANTHA, MFT

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-JUN-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-APR-23

KUEK, JOHN, MFT

Provider ID: N/A

☐ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

LIDLAW, JOHN, MFT

Provider ID: N/A

☐ 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Effective as of 01-JAN-24

SAMORA, ANTHONY, MFT

Provider ID: N/A

☐ 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108

Effective as of 01-DEC-22

SCHLOSSER, TARA, MFT

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

SUTTLE, CAROLYN, MFT†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

VILLAGOMEZ, JOSHUA, MFT

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

ZAYAS, MARIO, MFT

Provider ID: N/A

☐ 3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154

Effective as of 01-JAN-21

MATERNAL AND FETAL MEDICINE

AHN, JENNIFER, MD†

Provider ID: N/A

☐ 12264 EL CAMINO REAL
STE 204

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92130
Effective as of 01-FEB-21

BERGGREN, ERICA, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204

SAN DIEGO, CA 92130
Effective as of 01-JAN-21

DOWLING, DAVID, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204

SAN DIEGO, CA 92130
Effective as of 01-JAN-21

EMERUWA, UKACHI, MD

Provider ID: N/A

16950 VIA TAZON

SAN DIEGO, CA 92127
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD

Provider ID: N/A

4168 FRONT ST

SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GOLLIN, YVONNE, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 204

SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MEDICAL ONCOLOGY

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Effective as of 01-JAN-21

FLORES, EDNA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

KOSSMAN, STEVEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102

SAN DIEGO, CA 92123

Effective as of 01-SEP-15

SHAIKH, ANWER, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

SHENOY, CASIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102

SAN DIEGO, CA 92123

Effective as of 01-JAN-18

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-MAY-23

BEHREND, TERRY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BEHREND, TERRY, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115

Effective as of 01-MAR-16

BEHREND, TERRY, MD†

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115

Effective as of 01-JUL-22

BOISKIN, MARK, MD

Provider ID: N/A

☒ 9610 GRANITE RIDGE DR STE B

SAN DIEGO, CA 92123

Effective as of 01-JAN-24

CALDERON MOLINA, JUAN, MD

Provider ID: N/A

☒ 9610 GRANITE RIDGE DR STE B

SAN DIEGO, CA 92123

Effective as of 01-JAN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-SEP-21

DAVIS, JASON, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-SEP-20

DAVIS, JASON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-SEP-15

DAVIS, JASON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-JUN-23

DAVIS, JASON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

☒ 7910 FROST ST STE 250

SAN DIEGO, CA 92123

Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-MAR-15

FARAVARDEH, ARMAN, MD

Provider ID: N/A

☒ 8010 FROST ST STE 100

SAN DIEGO, CA 92123

Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-NOV-16

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

☒ 8010 FROST ST STE 510

SAN DIEGO, CA 92123

Effective as of 01-JUL-22

HAMMES, JOHN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-MAR-15

HAMMES, JOHN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103

Effective as of 01-JUL-22

HAMMES, JOHN, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 220

SAN DIEGO, CA 92103*

Effective as of 01-JAN-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

☒ 6402 EL CAJON BLVD STE 100

SAN DIEGO, CA 92115

Teleservice

Effective as of 01-APR-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-AUG-23

KHAING, KATHY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

LE, CHARLES, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

LE, CHARLES, MD†

Provider ID: N/A

4440 EUCLID AVE
SAN DIEGO, CA 92115

Effective as of 01-JUL-21

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-NOV-16

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE

100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115

Effective as of 01-JUN-23

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115

Effective as of 01-APR-17

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-SEP-22

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-SEP-20

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-NOV-23

QUEVEDO, JUAN, MD†

Provider ID: N/A

995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-AUG-21

RAHIMI, SINA, DO†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

SETHI, SUPREET, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

SHAPIRO, MARK, MD

Provider ID: N/A

9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

STEER, DYLAN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

THOMAS, THEODORE, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

ZHONG, YAN, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-22

ZHONG, YAN, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-22

ZHONG, YAN, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-22

ZHONG, YAN, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

FREDERICK, ALIYA, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GRISOLIA, JAMES, MD†

Provider ID: N/A

☐ 4033 3RD AVE STE 410
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

GUPTA, VISHAL, DO

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

GUTFLAIS, ERIC, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

HAAS, RICHARD, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

HAAS, RICHARD, MD†

Provider ID: N/A

☐ 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

HAAS, RICHARD, MD†

Provider ID: N/A

☐ 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Effective as of 01-OCT-21

HEADLEY, ALISON, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

☐ 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAR-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

KHAMISHON, BORIS, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-AUG-20

KHAMISHON, BORIS, MD†

Provider ID: N/A

☐ 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

C1. 網絡內提供者清單

專科護理醫師

KHAMISHON, BORIS, MD[†]

Provider ID: N/A

6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KURESHI, SOHAIB, MD[†]

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-SEP-20

LASKER, BRUCE, MD[†]

Provider ID: N/A

3737 MORAGA AVE STE A5
SAN DIEGO, CA 92117
Effective as of 01-FEB-07

MALIK, SUDHIR, MD[†]

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-DEC-20

MALIK, SUDHIR, MD[†]

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

MALIK, SUDHIR, MD[†]

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD[†]

Provider ID: N/A

4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-APR-23

RIGGINS, NINA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SCHORR, EMILY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

SCHULTE, JESSICA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SIAVOSHI, SARA, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

SIAVOSHI, SARA, DO[†]

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-FEB-22

TUASON, NORBERTO, MD[†]

Provider ID: N/A

438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-NOV-23

WIEGAND, SARAH, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NEUROLOGY CHILD

SATTAR, SHIFTEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NUCLEAR MEDICINE

ALEXANDER, SINDU, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHOI, ESTHER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KIPPER, MICHAEL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

METH, ERNIE, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 1
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-NOV-21

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

BLAKE, GARY, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CARDENAS, MICHAEL, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

CARDENAS, MICHAEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CASTILLO, MARIA, MD†

Provider ID: N/A

7930 FROST ST STE 103
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

CHAC, RICK, MD†

Provider ID: N/A

550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

CHUAN, SANDY, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-FEB-16

CONTRERAS, MICHELLE, MD†

Provider ID: N/A

550 WASHINGTON ST STE
331
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-22

DAVIS, TRACIE, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DELCORE, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

C1. 網絡內提供者清單 專科護理醫師

DELCORE, LAURA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

330 LEWIS ST

SAN DIEGO, CA 92103
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-AUG-22

FRUGONI, GINA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GELLENS, ANDREW, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-NOV-21

HARVEY, SCOTT, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HUI, KIM, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

JAIME, CINDY, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-JUN-18

JENKINS, ENCHANTA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUN-22

KHAN, ALIYA, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-NOV-21

MACKAY, GILLIAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MENDEZ, DIEGO, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114

C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-APR-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

NGUYEN, NICOLE, MD†

Provider ID: N/A

12395 EL CAMINO REAL
STE 117
SAN DIEGO, CA 92130

Effective as of 01-DEC-14

PARK, SUSANNA, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-APR-16

PICKETT, CHARLOTTE, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Effective as of 01-SEP-21

SCHMIDT, LILA, MD

Provider ID: N/A

3969 4TH AVE STE 207
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

SHUCKETT, ARIEL, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

TAJRAN, DEENA, MD†

Provider ID: N/A

10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126

Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

TRUJILLO, JENNIFER, DO†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*

Effective as of 01-JUL-22

VAN DEN HEUVEL, KELLY, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

VU, LAC, MD

Provider ID: N/A

5555 RESERVOIR DR STE
205

SAN DIEGO, CA 92120

Effective as of 01-JUL-23

WILLIAMS, ALISA, MD†

Provider ID: N/A

5555 RESERVOIR DR STE
307

SAN DIEGO, CA 92120*

Effective as of 01-JAN-20

C1. 網絡內提供者清單 專科護理醫師

OCCUPATIONAL MEDICINE

JACKSON, CODY, MD

Provider ID: N/A

☒ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-22

OCCUPATIONAL THERAPIST

ARRIESGADO, MINNETT, OT

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

CHOW, JENNIFER, OT

Provider ID: N/A

☒ 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CHOW, JENNIFER, OT

Provider ID: N/A

☒ 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

CUA, NICOLE, OT

Provider ID: N/A

☒ 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-MAR-24

FARHAT, KELLI, OT

Provider ID: N/A

☒ 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-APR-22

HUDSON, BONNIE, OT

Provider ID: N/A

☒ 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

HUDSON, BONNIE, OT

Provider ID: N/A

☒ 88 E BONITA RD
STE C

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

☒ 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-DEC-23

MANECKE, KRISTEN, OT

Provider ID: N/A

☒ 9333 GENESEE AVE STE
350B

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

☒ 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

☒ 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

AVALLONE, THOMAS, MD

Provider ID: N/A

☒ 5330 CARROLL CANYON
RD STE 210

SAN DIEGO, CA 92121

Effective as of 01-MAR-24

AVALLONE, THOMAS, MD†

Provider ID: N/A

☒ 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-APR-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

☒ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-MAR-18

BINDER, NICHOLAS, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

BOECKMANN, JESSICA, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

BOLO, KYLE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CHANG, TOM, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

COURIS, MICHAEL, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

CU-UNJIENG, ANDREW, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 405
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

ESLANI, MEDI, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GUALTIERI, CHRISTOPHER,

MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAAK, LOGAN, MD†

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JAN-24

HANDLER, SUZANNE, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

HSU, CHRISTOPHER, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAY-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

HUYNH, PAUL, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-22

JACOBSEN, BRADLEY, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

JIN, MAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KEEFE, KELLY, MD†

Provider ID: N/A

3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

KHAN, FAHAD, MD†

Provider ID: N/A

233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

KHATIB, NORA, MD†

Provider ID: N/A

4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHATIB, NORA, MD†

Provider ID: N/A

4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

LANG, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

MANI, NASRIN, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUN-18

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

C1. 網絡內提供者清單 專科護理醫師

MORTON, ASA, MD†

Provider ID: N/A

☐ 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

MORTON, ASA, MD

Provider ID: N/A

☐ 3939 3RD AVE STE B
SAN DIEGO, CA 92103
Effective as of 01-APR-24

MORTON, ASA, MD

Provider ID: N/A

☐ 3939 3RD AVE BLDG B
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MORTON, ASA, MD†

Provider ID: N/A

☐ 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

MOSS, JASON, MD†

Provider ID: N/A

☐ 5555 RESERVOIR DR STE
201
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD

Provider ID: N/A

☐ 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

☐ 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-APR-20

PATEL, SARJAN, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PATEL, GITANE, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

PATEL, SARJAN, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

PATEL, SARJAN, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

☐ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PERRY, ARTHUR, MD

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

☐ 10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126

Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

☐ 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-APR-23

PHAN, RYAN, MD†

Provider ID: N/A

☐ 10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-OCT-22

PHAN, RYAN, MD†

Provider ID: N/A

☐ 10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

PHAN, RYAN, MD

Provider ID: N/A

☐ 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PONS, MAURICIO, MD

Provider ID: N/A

☐ 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-MAY-23

PRABHU, SUJATA, MD†

Provider ID: N/A

☐ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A

☐ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-18

C1. 網絡內提供者清單

專科護理醫師

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PUIG LLANO, MANUEL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

RAHMATNEJAD, KAMRAN, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ROBINSON, FANE, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROBINSON, FANE, MD†

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

ROESKE, RICHMOND, MD

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROESKE, RICHMOND, MD

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📍 3939 3RD AVE

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 5330 CARROLL CANYON

C1. 網絡內提供者清單 專科護理醫師

RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD
Provider ID: N/A
☑ 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD
Provider ID: N/A
☑ 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

SHOJI, MARISSA, MD
Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SHOJI, MARISSA, MD
Provider ID: N/A
☑ 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SMITH, MARK, MD
Provider ID: N/A
☑ 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

SMITH, WILLIAM, MD
Provider ID: N/A
☑ 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SONG, DELU, MD
Provider ID: N/A
☑ 7695 CARDINAL CT STE 100

SAN DIEGO, CA 92123
Effective as of 01-DEC-23

SONG, DELU, MD
Provider ID: N/A
☑ 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

WARLEN, MARK, MD†
Provider ID: N/A
☑ 3720 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

YAMADA, KENTARO, MD†
Provider ID: N/A
☑ 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

YAMADA, KENTARO, MD†
Provider ID: N/A
☑ 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

ZABANEH, ALEXANDER, MD†
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†
Provider ID: N/A
☑ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

ZHAO, TAILUN, MD
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

AOTO, KIM, OD†
Provider ID: N/A
☑ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†
Provider ID: N/A
☑ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†
Provider ID: N/A
☑ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DOAN, DORA, OD
Provider ID: N/A
☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-21

DYER, SHARON, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-FEB-24

DYER, SHARON, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Effective as of 01-SEP-22

HAN, SUL KI, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-DEC-22

HO, HOANG MINH, OD

Provider ID: N/A

10737 CAMINO RUIZ STE
215-220

SAN DIEGO, CA 92126

Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

JOMOC, CAITLIN, OD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-FEB-24

JULAZADEH, SARA, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-NOV-22

KIM, PHILIP, OD†

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

4344 CONVOY ST STE C2

SAN DIEGO, CA 92111

Effective as of 01-DEC-22

RING, ROBERT, OD

Provider ID: N/A

13223 BLACK MOUNTAIN
RD STE 6

SAN DIEGO, CA 92129

Effective as of 01-FEB-24

SCHWAB, GARY, OD†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

SCHWAB, GARY, OD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

TONNU, ANH, OD[†]

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

TONNU, ANH, OD[†]

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

VINH, JOHN, OD[†]

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

VINH, JOHN, OD[†]

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

YU, CAROL, OD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEHROTRA, SACHI, DDS

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD[†]

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD[†]

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD[†]

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

BUSH, JAMES, MD[†]

Provider ID: N/A

3805 FRONT ST
SAN DIEGO, CA 92103*
Effective as of 01-AUG-20

CALIFANO, JOSEPH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CALZADA, AUDREY, MD[†]

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19

CALZADA, AUDREY, MD[†]

Provider ID: N/A

5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

CALZADA, AUDREY, MD†

Provider ID: N/A

☐ 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

☐ 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

COFFEY, CHARLES, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

COFFEY, CHARLES, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

☐ 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

☐ 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

☐ 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICK, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

☐ 8899 UNIVERSITY CENTER

C1. 網絡內提供者清單 專科護理醫師

LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-JAN-23

HAUFF, SAMANTHA, MD

Provider ID: N/A

4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-AUG-20

HOM, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD†

Provider ID: N/A
☒ 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

MAGIT, ANTHONY, MD

Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MIYA, GARY, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

NGUYEN, QUYEN, MD†

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SALL, EDWARD, DDS

Provider ID: N/A
☒ 5471 KEARNY VILLA RD STE
201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A
☒ 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
☒ 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TORCHINSKY, CYRUS, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-FEB-18

TORCHINSKY, CYRUS, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 410
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAHOOTI, SEPI, MD†

Provider ID: N/A

16835 W BERNARDO DR
STE 212
SAN DIEGO, CA 92127
Teleservice

Effective as of 01-DEC-22

SONG, WEI, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

STEPHENS, LAURA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

USMANI, AMENA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DWEK, JERRY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

EVORA, DARRYL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EVORA, DARRYL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

C1. 網絡內提供者清單 專科護理醫師

EVORA, DARRYL, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KONING, JEFFREY, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KONING, JEFFREY, MD†

Provider ID: N/A

☐ 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

KRUK, PETER, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD†

Provider ID: N/A

☐ 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD†

Provider ID: N/A

☐ 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-OCT-21

PEDIATRICS

ALLSUP, VICTORIA, MD

Provider ID: N/A

☐ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ALLSUP, VICTORIA, MD

Provider ID: N/A

☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

ANDREE, GREGOR, MD

Provider ID: N/A

☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ANDREE, GREGOR, MD

Provider ID: N/A

☐ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

☐ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

GIBONEY, JENNIFER, MD

Provider ID: N/A

☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

GIBONEY, JENNIFER, MD

Provider ID: N/A

☐ 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-23

GROBMAN, LILLIAN, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

KARMAKAR, KANKA, MD

Provider ID: N/A

☐ 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Teleservice
Effective as of 01-JAN-21

MARC AURELE, KRISHELLE, MD

Provider ID: N/A

☐ 7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

SONG, RICHARD, MD

Provider ID: N/A

☐ 7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

SUTTNER, DENISE, MD

Provider ID: N/A

☐ 7910 FROST ST STE 230
SAN DIEGO, CA 92123

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-SEP-23

WEISS, KATHERINE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ZAHEER, AARON, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

ZAHEER, AARON, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAR-24

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-23

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-JUN-23

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

Effective as of 01-APR-24

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101

Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101

Effective as of 01-JAN-21

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302

SAN DIEGO, CA 92120

Effective as of 01-SEP-20

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-APR-23

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-SEP-23

SCOTT, ROBERT, MD

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-FEB-24

TAHAEI, SEYED, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

C1. 網絡內提供者清單 專科護理醫師

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-APR-22

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

ALYAS, ALISIA, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ANDERSON, MATTHEW, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ANDERSON, CARLEY, PA†

Provider ID: N/A

11865 CARMEL MOUNTAIN
RD STE 1104
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

ARMENTA, JORGE, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

ARROYO, VANIA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

BASIN, NATALIE, PA†

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Teleservice
Effective as of 01-FEB-21

BEITTER, KEERSTIN, PA†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAR-22

BRAMBILA, YELENA, PA

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-DEC-21

BRAVO, RICARDO, PA

Provider ID: N/A

3490 PALM AVE

SAN DIEGO, CA 92154
Effective as of 01-JUL-23

BROWN, COLLEEN, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

CRITES, LAURA, PA

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-SEP-22

DANESHVAR, ABRAHAM, PA†

Provider ID: N/A

9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

DARZI, MARIAM, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

C1. 網絡內提供者清單 專科護理醫師

DOUGHERTY, CLARA, PA

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

DU, SARAH, PA

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-APR-24

ENCE, EMILY, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

GUZMAN, HORTENCIA, PA

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HABBOUSH, RANA, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HABBOUSH, RANA, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HARMEYER, JENNA, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

HARRIS, CHRISTINA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

HAZAN, ALISON, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

203 W F ST
SAN DIEGO, CA 92101
Effective as of 01-JAN-22

HIGUERA, EDITH, PA

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

HO, HOANG HUU, PA

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-OCT-23

HO, HOANG HUU, PA

Provider ID: N/A

2418 ULRIC ST
SAN DIEGO, CA 92111
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-23

HUNTER, JACOB, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

HUNTER, JACOB, PA†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

KHALEGHI, MANI, PA†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

LEWIS, DEVON, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101

Teleservice

Effective as of 01-AUG-22

LINDEMANN, CHRISTINA, PA†

Provider ID: N/A

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

LONGOBARDO, FRANCESCA, PA†

Provider ID: N/A

9333 GENESEE AVE STE

350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

MADAN, SAKSHI, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-AUG-22

MARTIN, HALEY, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MERCER, KELLY, PA†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

MOLINA, MYRNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-APR-24

MOORMAN, KRISTA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-MAR-23

MURRAY, BREANNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-FEB-21

NELMS, MICHAEL, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-NOV-23

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-NOV-23

PELIO, DARREN, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

PHAM, JENNIFER, PA

Provider ID: N/A

3900 5TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

PHUNG, AIVI, PA†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PHUNG, AIVI, PA†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PICKERING, OANA, PA

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101

Effective as of 01-MAY-23

POGGI, SARA, PA

Provider ID: N/A

5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

POST, LACEY, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Effective as of 01-DEC-21

POTTER SMITH, SARAH, PA

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

PRIJATEL, SABRINA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

PYLE, ALEXANDRA, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

PYLE, ALEXANDRA, PA

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-24

QUIJANO, GLENN, PA†

Provider ID: N/A

2100 5TH AVE STE 200
SAN DIEGO, CA 92101

Teleservice

Effective as of 01-AUG-22

RAI, GEORGINA, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

RALL, EMILY, PA

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-JAN-21

SCHOELLER, BIANCA, PA†

Provider ID: N/A

3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

Effective as of 01-DEC-21

SEBASTIAN, TRACY, PA†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

SHARPE, NORMA, PA

Provider ID: N/A

316 25TH ST
SAN DIEGO, CA 92102

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-23

SHIVELY, JEANNINE, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

SMITH, ALLISON, PA

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SNYDER, AMANDA, PA

Provider ID: N/A

📍 4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

SPEH, BRIAN, PA

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-MAR-24

STIFF, TYLER, PA

Provider ID: N/A

📍 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

SUPERNAW, AMY, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

TAYLOR, RYAN, PA

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-24

TRIMLETT, COLLEEN, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VALENCIA, JESUS, PA

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 202

SAN DIEGO, CA 92102

Teleservice

Effective as of 01-NOV-23

VANOCKER, KARI, PA

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-MAR-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

WALSH, HEATHER, PA†

Provider ID: N/A

📍 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

WEBB, SHANNON, PA

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAY-23

WEBB, SHANNON, PA

Provider ID: N/A

📍 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-24

WEIR, JACQUELINE, PA†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

C1. 網絡內提供者清單 專科護理醫師

WEIR, JACQUELINE, PA†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-APR-21

WILAND, WINONA, PA

Provider ID: N/A

5405 OBERLIN DR STE 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-JUL-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-AUG-23

PODIATRIST

ALMIRANTE, MARIA, DPM

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

ALMIRANTE, MARIA, DPM

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

ALMIRANTE, MARIA, DPM

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

ALMIRANTE, MARIA, DPM

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

BROOKSHIER, TRENT, DPM

Provider ID: N/A

3989 32ND ST
SAN DIEGO, CA 92104
Teleservice
Effective as of 01-DEC-23

BUI, JOSEPH, DPM

Provider ID: N/A

5354 UNIVERSITY AVE STE
2
SAN DIEGO, CA 92105
Effective as of 01-AUG-23

BUI, JOSEPH, DPM

Provider ID: N/A

11205 VIA CARROZA
SAN DIEGO, CA 92124*
Effective as of 01-APR-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-15

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CULLEN, BENJAMIN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

- ☐ 4712 EL CAJON BLVD STE D SAN DIEGO, CA 92115
Effective as of 01-JAN-21
FOYGELMAN, ALEKSANDR, DPM†
Provider ID: N/A
- ☐ 4712 EL CAJON BLVD STE D SAN DIEGO, CA 92115
Effective as of 01-JAN-21
FOYGELMAN, ALEKSANDR, DPM†
Provider ID: N/A
- ☐ 4712 EL CAJON BLVD STE D SAN DIEGO, CA 92115
Effective as of 01-JAN-24
FOYGELMAN, ALEKSANDR, DPM†
Provider ID: N/A
- ☐ 4712 EL CAJON BLVD STE D SAN DIEGO, CA 92115
Effective as of 01-JUL-22
JOLLEY, WALTER, DPM
Provider ID: N/A
- ☐ 5222 BALBOA AVE STE 41 SAN DIEGO, CA 92117
Effective as of 01-APR-15
JOLLEY, WALTER, DPM
Provider ID: N/A
- ☐ 5222 BALBOA AVE STE 41 SAN DIEGO, CA 92117
Effective as of 01-SEP-20
LEE, RYAN, DPM†
Provider ID: N/A
- ☐ 2650 CAMINO DEL RIO N STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17
QUINN, MICHAEL, DPM†
- ☐ 7485 MISSION VALLEY RD STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07
QUINN, MICHAEL, DPM†
Provider ID: N/A
- ☐ 7485 MISSION VALLEY RD STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUL-17
RICE, BRITTANY, DPM†
Provider ID: N/A
- ☐ 2650 CAMINO DEL RIO N STE 200
SAN DIEGO, CA 92108
Effective as of 01-OCT-17
TOUMA, ELIE, DPM
Provider ID: N/A
- ☐ 6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
Effective as of 01-APR-23
VALLONE, ROBERT, DPM†
Provider ID: N/A
- ☐ 3363 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-17
WILSON, MATTHEW, DPM†
Provider ID: N/A
- ☐ 5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120
Effective as of 01-FEB-22
PREVENTATIVE MEDICINE GENERAL
HERR, RAYMOND, MD
Provider ID: N/A
- ☐ 3737 MORAGA AVE STE B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-MAR-23
JACKSON, CODY, MD
Provider ID: N/A
- ☐ 6386 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-SEP-22
JACKSON, CODY, MD
Provider ID: N/A
- ☐ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22
NAJAR, FAUZI, MD
Provider ID: N/A
- ☐ 3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23
ROMERO, CAMILA, MD
Provider ID: N/A
- ☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23
ROMERO, CAMILA, MD
Provider ID: N/A
- ☐ 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22
ROMERO, CAMILA, MD
Provider ID: N/A
- ☐ 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

C1. 網絡內提供者清單

專科護理醫師

STERN, ANNA, MD

Provider ID: N/A

☐ 4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-JAN-21

PSYCHIATRY

BEVINS, ELIZABETH, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100

SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

☐ 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

☐ 7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

☐ 7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

FANOUS, ASHRAF, MD

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

☐ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

☐ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD

Provider ID: N/A

☐ 6655 ALVARADO RD

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD

Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

JOHN, TANNER, MD

Provider ID: N/A
☑ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice

Effective as of 01-OCT-23

JOHN, TANNER, MD

Provider ID: N/A
☑ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice
Effective as of 01-OCT-23

JOSHI, YASH, MD

Provider ID: N/A
☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A
☑ 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD[†]

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD[†]

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. 網絡內提供者清單 專科護理醫師

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARRIS, BIANCA, MD

Provider ID: N/A

☒ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

☒ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KEIFER, JASON, MD

Provider ID: N/A

☒ 4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

KEIFER, JASON, MD

Provider ID: N/A

☒ 4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

LEDBETTER, ALEX, DO

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEVINE, REED, MD

Provider ID: N/A

☒ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

LEVINE, REED, MD

Provider ID: N/A

☒ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

LI, XIA, MD†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MIRON, JEAN-PHILIPPE, MD

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MOORE, SHAVON, MD†

Provider ID: N/A

☒ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

☒ 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

☒ 12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD

Provider ID: N/A

☒ 12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

MORRIS, RAPHAEL, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD

Provider ID: N/A

📍 12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD†

Provider ID: N/A

📍 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Effective as of 01-NOV-23

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101

**C1. 網絡內提供者清單
專科護理醫師**

Effective as of 01-FEB-23

QAYOUMI, WALI, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

☒ 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A

☒ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

☒ 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-OCT-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

☒ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

☒ 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD†**

Provider ID: N/A

☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD†**

Provider ID: N/A

☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-SEP-21

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

**SALGUERO GALLAND, MARIO,
MD**

Provider ID: N/A

☒ 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-23

TADROS, EMAD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

TADROS, EMAD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

☒ 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

TUASON, NORBERTO, MD†

Provider ID: N/A

☒ 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108

Teleservice

Effective as of 01-NOV-23

TUASON, NORBERTO, MD†

Provider ID: N/A

☒ 438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108

Teleservice

Effective as of 01-NOV-23

WEISSMAN, CORY, MD†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

WEISSMAN, CORY, MD†

Provider ID: N/A

☒ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☒ 10672 WEXFORD ST STE
280

C1. 網絡內提供者清單
專科護理醫師

SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

**PSYCHIATRY SLEEP
MEDICINE**

KARIPPOT, ANOOP, MD†
Provider ID: N/A
☒ 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST

BADER, RACHEL, PSYD
Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

BADER, RACHEL, PSYD
Provider ID: N/A
☒ 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-23

**BAHENA-COLLEY, SANDRA,
PSYD†**
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

**BAHENA-COLLEY, SANDRA,
PSYD†**
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice
Effective as of 01-APR-21

BHAJU, JESHMIN, PhD†
Provider ID: N/A
☒ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BHAJU, JESHMIN, PhD†
Provider ID: N/A
☒ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CARBONELL, SONIA, PSYD†
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

CARBONELL, SONIA, PSYD†
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

**ESTRADA PATINO, ANGELA,
PSYD**
Provider ID: N/A
☒ 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

**ESTRADA PATINO, ANGELA,
PSYD**
Provider ID: N/A
☒ 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

GALANT, DANIEL, PhD

Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

GOMEZ, JUANITA, PhD†
Provider ID: N/A
☒ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†
Provider ID: N/A
☒ 6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-AUG-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A
☒ 4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A
☒ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A
☒ 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A

4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

JOHNSON, ARIKA, PSYD†
Provider ID: N/A

4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

MINASSIAN, ARPI, PhD†
Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†
Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MIRANDA, CYNTHIA, PhD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

PARK, JESSIE, PSYD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARK, JESSIE, PSYD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

TARLE, STEPHANIE, PhD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-DEC-23

VANFOSSEN, BRIAN, PhD†
Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†
Provider ID: N/A

3434 MIDWAY DR STE 2001

SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†
Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†
Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-23

PULMONARY DISEASES

BAILEY, JACOB, MD
Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

BAILEY, JACOB, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

BAO, GANG, MD†
Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

LE, HUAN, MD†
Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-22

LE, HUAN, MD[†]

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD[†]

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD[†]

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-14

MCGUIRE, WILLIAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RANCHES, GREGORY, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-AUG-20

RANCHES, GREGORY, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RANCHES, GREGORY, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
508
SAN DIEGO, CA 92103

Effective as of 01-MAY-20

RESNIKOFF, PAMELA, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WONG, STEVEN, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

WONG, STEVEN, MD[†]

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD[†]

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

BRUGGEMAN, ANDREW, MD[†]

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-MAR-21

CARMONA, RUBEN, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HATTANGADI GLUTH, JONA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE

SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123
Effective as of 01-OCT-22

MACEWAN, IAIN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A


16918 DOVE CANYON RD
STE 103

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92127
Effective as of 01-JAN-21


MURPHY, KEVIN, MD†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21


PEJAVAR, SUNANDA, MD†

Provider ID: N/A

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21


SANDHU, AJAY, MD†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21


SHARABI, ANDREW, MD†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21


SHIRAZI, REZA, MD†

Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†


Provider ID: N/A

 5395 RUFFIN RD STE 103

SAN DIEGO, CA 92123
Effective as of 01-JUL-22


SHIRAZI, REZA, MD†

Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22


SHIRAZI, REZA, MD†

Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22


SHIRAZI, REZA, MD†

Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22


SHIRAZI, REZA, MD†

Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21


SIMPSON, DANIEL, MD†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-23

STRAKA, CHRISTOPHER, MD†


Provider ID: N/A

 16918 DOVE CANYON RD

STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21


TYE, KAREN, MD

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-SEP-23


TYE, KAREN, MD

Provider ID: N/A

 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-23


VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22


VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†


Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22


VAKILIAN, SIAVOSH, MD†

Provider ID: N/A


C1. 網絡內提供者清單 專科護理醫師

 3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21


VAKILIAN, SIAVOSH, MD†
Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-21


VAKILIAN, SIAVOSH, MD†
Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUL-21


VOLPP, PAUL, MD†

Provider ID: N/A
 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21


WEINSTEIN, GEOFFREY, MD†
Provider ID: N/A

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21


WHITE, EVAN, MD†

Provider ID: N/A
 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-22

YORK, JOHN, MD


Provider ID: N/A
 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

YORK, JOHN, MD


Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC


AGANOVIC, LEJLA, MD

Provider ID: N/A
 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


AGANOVIC, LEJLA, MD

Provider ID: N/A
 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


AGANOVIC, LEJLA, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23


ANDERSON, GREGORY, MD†

Provider ID: N/A
 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-23


ANDERSON, GREGORY, MD

Provider ID: N/A
 9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23


ANDERSON, GREGORY, MD†

Provider ID: N/A
 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-22


BOLAR, DIVYA, MD

Provider ID: N/A
 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


BOLAR, DIVYA, MD

Provider ID: N/A
 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


BOLAR, DIVYA, MD

Provider ID: N/A
 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23


BOSWELL, GILBERT, MD

Provider ID: N/A
 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


BOSWELL, GILBERT, MD

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

BRANCH, CODY, MD

Provider ID: N/A
 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BROUHA, SHARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BUI, KEVIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BUI, KEVIN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BUI, KEVIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CARSWELL, AIMEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CARSWELL, AIMEE, MD

Provider ID: N/A

330 LEWIS ST

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CHANG, JENNIFER, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHANG, JENNIFER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHEN, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. 網絡內提供者清單 專科護理醫師

CHUNG, CHRISTINE, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

COOPER, JAMES, MD†

Provider ID: N/A

☐ 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

DORROS, STEPHEN, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DORROS, STEPHEN, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

EAJAZI, ALIREZA, MD†

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EAJAZI, ALIREZA, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FARID, NIKDOKHT, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FAZELI, SOUDABEH, MD

Provider ID: N/A

☐ 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FLISZAR, EVELYNE, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FLISZAR, EVELYNE, MD

Provider ID: N/A

☐ 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FLISZAR, EVELYNE, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

☐ 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

☐ 408 DICKINSON ST

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92103
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GENTILI, AMILCARE, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAHN, LEWIS, MD

Provider ID: N/A

📍 408 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANDWERKER, JASON, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAWLEY, DANIEL, MD

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HAWLEY, DANIEL, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HOROWITZ, MICHAEL, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HSIAO, ALBERT, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

C1. 網絡內提供者清單 專科護理醫師

HUANG, BRADY, MD

Provider ID: N/A

6655 ALVARADO RD
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Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HUGHES, TUDOR, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JACOBSON, JON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBSON, JON, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JAFFRAY, PAUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KANSAGRA, AKASH, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

KAROW, DAVID, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

408 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KAROW, DAVID, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KIM, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KIM, ERIC, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

C1. 網絡內提供者清單 專科護理醫師

KLIGERMAN, SETH, MD

Provider ID: N/A

6655 ALVARADO RD
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Effective as of 01-FEB-24

KLIGERMAN, SETH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KLIGERMAN, SETH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KONDILI, DHIMITER, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LAKE, MENORE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

LAKE, MENORE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

LEE, ROLAND, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

LEE, ROLAND, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

LEE, ROLAND, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
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SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

6655 ALVARADO RD
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Effective as of 01-FEB-24

LIM, VIVIAN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MARKS, ROBERT, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCDONALD, MARIN, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-24

MCDONALD, MARIN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
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Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MCNAMEE, CAIRINE, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MURPHY, PAUL, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

MURPHY, PAUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

MURPHY, PAUL, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

NORBASH, ALEXANDER, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

OBOYLE, MARY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

OBOYLE, MARY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

OBOYLE, MARY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

408 DICKINSON ST

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PATHRIA, MINI, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

📄 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

RATTNER, ZACHARY, MD†

Provider ID: N/A

📄 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RATTNER, ZACHARY, MD†

Provider ID: N/A

📄 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

📄 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102*
Effective as of 01-JUL-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

📄 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RESNICK, DONALD, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RESNICK, DONALD, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RITCHIE, DAVID, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SADAT, SAYED, DO

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SLATER, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SPENGLER, NATHAN, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-FEB-21

SWEET, JASON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

THOMPSON, COLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

C1. 網絡內提供者清單 專科護理醫師

THOMPSON, COLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

THOMPSON, COLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

VAHDOT, NOUSHIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAHDOT, NOUSHIN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-22

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

WONG, FELIX, MD†

Provider ID: N/A

3939 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

WONG, FELIX, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

YORK, VINCENT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YORK, JOHN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YORK, VINCENT, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

ZINK BRODY, GORDON, MD

Provider ID: N/A

9095 RIO SAN DIEGO DR

STE 150

SAN DIEGO, CA 92108

Effective as of 01-OCT-23

ZINK BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-21

ZINK BRODY, GORDON, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

REGISTERED DIETITIAN / NUTRITIONIST

BRECKON, SAMANTHA, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

BUNDY, KATHLEEN, RD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

CALLAWAY, MALLORY, RD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-MAR-22

DRIVICK, VALERIE, RD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-21

DRIVICK, VALERIE, RD

Provider ID: N/A

☐ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

FISHER, JENNIFER, RD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

GONZALEZ, KRISTEN, RDN

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

☐ 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

☐ 4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

☐ 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VALDEZ, KELLY, RD

Provider ID: N/A

☐ 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

VERGARA RODRIGUEZ, DIANA, RD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

☐ 4445 EASTGATE MALL STE
105

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

BOUTELLE, DAVID, PT

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

☐ 9909 MIRA MESA BLVD
STE 120

SAN DIEGO, CA 92131

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

☐ 9888 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

☐ 9888 CARMEL MOUNTAIN
RD STE D

SAN DIEGO, CA 92129

Effective as of 01-JAN-24

CORTEZ, AARON, PT†

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-21

DANG, KAYLEE, PT†

Provider ID: N/A

☐ 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

☐ 7525 METROPOLITAN DR
STE 302

SAN DIEGO, CA 92108

Teleservice

Effective as of 01-JAN-21

C1. 網絡內提供者清單

專科護理醫師

FARRAR, COURTNEY, PT†

Provider ID: N/A

📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-DEC-22

FERRER, MIRON, PT

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

FUREY, CINDY, PT

Provider ID: N/A

📍 5555 RESERVOIR DR STE
300

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

FUREY, CINDY, PT

Provider ID: N/A

📍 5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

GRIMES, KELLY, PT

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

HARRAH, WILLIAM, PT

Provider ID: N/A

📍 9333 GENESEE AVE STE
350B

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

JOHNSON, KENNADY, PT

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAR-24

MONROE, MAX, PT

Provider ID: N/A

📍 11750 SORRENTO VALLEY
RD STE 130

SAN DIEGO, CA 92121

Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

PAPA, AMY, PT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

PERRONE, AIMEE, PT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-DEC-21

ROSS, JENNY, PT

Provider ID: N/A

📍 7525 METROPOLITAN DR
SAN DIEGO, CA 92108

Effective as of 01-JAN-23

TITH, JENNY, PT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
103

SAN DIEGO, CA 92121

Effective as of 01-MAY-22

TSAI, CINDY, PT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

TSAI, CINDY, PT

Provider ID: N/A

📍 3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-JUN-23

VANDEWIELE, EMILY, PT†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-OCT-21

VASQUEZ, BENJAMIN, PT

Provider ID: N/A

📍 4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

RHEUMATOLOGY

HUYNH, DOQUYEN, MD

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-23

HUYNH, DOQUYEN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-NOV-23

PRESS, RAYMOND, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Effective as of 01-JUN-21

DOMBROWSKY, JOSEPH, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Effective as of 01-APR-24

FINCH, CHRISTINA, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-22

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JUN-22

BLUMENFELD, LIZA, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-24

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

DOCKTER, ANDI, SP†

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GONZALEZ MELENDEZ, ADALICE, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

GONZALEZ MELENDEZ, ADALICE, SP

Provider ID: N/A

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

GONZALEZ MELENDEZ, ADALICE, SP

Provider ID: N/A

📍 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JUN-22

KOUKEYAN, KARIN, SP

Provider ID: N/A

📍 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

📍 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

NAPOLEAN, REBECCA, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP

Provider ID: N/A

📍 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

WALSH, ERIN, SP

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-NOV-11

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

LOPEZ, NICOLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

TOMAN, JEFFREY, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

OLSON, ERIK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

VENTRO, GEORGE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SURGERY GENERAL

ALVORD, PAUL, MD†

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

ARMANI, AVA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BARNES, RYAN, DO†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

C1. 網絡內提供者清單 專科護理醫師

BENCH, SHAWN, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BRODERICK, RYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

BRODERICK, RYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

ELLNER, JULIE, MD

Provider ID: N/A

2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

FARINAS, LEAH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-OCT-20

GIURGIU, DAN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

HART, MARQUIS, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HORGAN, SANTIAGO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

C1. 網絡內提供者清單 專科護理醫師

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

JINDAL, RISHI, MD†

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-AUG-18

KING, JUSTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

KOSOY, DANIEL, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

LANGENBERG, BRET, DO†

Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MUELLER, GEORGE, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

POLLACK, LARRY, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

PRICE, ERIN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

SANDLER, BRYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

SANDLER, BRYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

WOODWARD, STEPHANIE, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

ZORN, GEORGE, MD†

Provider ID: N/A

4060 4TH AVE STE 330
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

SURGERY GENERAL VASCULAR

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

MORENO MARTINEZ, ENRIQUE, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

C1. 網絡內提供者清單
專科護理醫師

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-JAN-23

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-JUN-23

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103

Effective as of 01-JAN-14

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

SURGERY HAND
ORTHOPEDIC

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

AMMIRATI, MARIO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

FLORES, BRUNO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-APR-22

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

GOEL, GUNJAN, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-JUL-19

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-FEB-24

OSTRUP, RICHARD, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111*

Effective as of 01-SEP-20

UDANI, VIKRAM, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

ZACHARIAH, MARCUS, MD

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD†

Provider ID: N/A

7625 MESA COLLEGE DR
STE 315A
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123*

Effective as of 01-MAR-24

C1. 網絡內提供者清單

專科護理醫師

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

BAWA, MANEESH, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BLAIS, MICAH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-SEP-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

BRERETON, DANIEL, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

BUKATA, SUSAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUKATA, SUSAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

CAGE, DORI NEILL, MD†

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-NOV-14

CHOI, JIHOON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

DAVID, TAL, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123*
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

FLOOD, DAVID, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-DEC-22

GOEB, YANNICK, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GROTTING, JOHN, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

JAIN, RINA, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-MAY-22

KANSARA, DEVANSHU, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108
Effective as of 01-JUN-22

KASIR, RAFID, MD

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

KIM, PAUL, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-DEC-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-20

KOLODGE, GAVIN, DO†

Provider ID: N/A

9339 GENESEE AVE STE
150

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

KRUEGER, VAN, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121†

Effective as of 01-OCT-23

KRUEGER, VAN, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-OCT-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

LENIHAN, MICHAEL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401

SAN DIEGO, CA 92123

Effective as of 01-SEP-23

MACK, GREGORY, MD

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123

Effective as of 01-JAN-15

MCCANDLESS, JEREMY, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-OCT-17

MCKNIGHT, BRADEN, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JAN-14

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD

STE 104A

SAN DIEGO, CA 92108

Effective as of 01-FEB-07

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-NOV-21

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

POMERANTZ, MICHAEL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401

SAN DIEGO, CA 92123

Effective as of 01-SEP-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

RAISZADEH, RAMIN, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-FEB-17

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

ROBKER, JERRICK, DO†

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-22

ROBKER, JERRICK, DO†

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121*
Effective as of 01-SEP-20

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-15

ROSENFELD, ALAN, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SCHULTZ, JEFFREY, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

SCHULTZ, JEFFREY, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

SCHULTZEL, MARK, MD†

Provider ID: N/A

☐ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

SHAH, KALPIT, MD†

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SHILLITO, MATTHEW, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-AUG-23

SHILLITO, MATTHEW, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

SIROTA, MICHAEL, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

SIROTA, MICHAEL, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-23

SULLIVAN, THOMAS, MD

Provider ID: N/A

☞ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SUN, MICHAEL, MD

Provider ID: N/A

☞ 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-DEC-23

TANAKA, SCOTT, MD†

Provider ID: N/A

☞ 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-AUG-17

TASTO, JAMES, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-JAN-21

TASTO, JAMES, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120*

Effective as of 01-AUG-23

TASTO, JAMES, MD†

Provider ID: N/A

☞ 6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-SEP-23

TAYLOR, MARIO, MD

Provider ID: N/A

☞ 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

TAYLOR, MARIO, MD

Provider ID: N/A

☞ 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☞ 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☞ 9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☞ 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAR-16

TAYYAB, NEIL, MD†

Provider ID: N/A

☞ 9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☞ 9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☞ 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JAN-14

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☞ 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-SEP-15

URBAND, LINDSEY, MD†

Provider ID: N/A

☞ 8008 FROST ST STE 403
SAN DIEGO, CA 92123

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUL-19

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-23

SURGERY PLASTIC

APOSTOLIDES, JOHN, MD

Provider ID: N/A

1322 SCOTT ST STE 102
SAN DIEGO, CA 92106

Effective as of 01-AUG-15

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130

Effective as of 01-MAR-02

CHAO, JAMES, MD[†]

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD[†]

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

GOSMAN, AMANDA, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

HANDLER, BARRY, MD[†]

Provider ID: N/A

6699 ALVARADO RD STE

2305

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KUPFER, DAVID, MD[†]

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123

Effective as of 01-JUL-14

NGUYEN, KHANG, MD

Provider ID: N/A

6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121

Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD[†]

Provider ID: N/A

4033 3RD AVE STE 210
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

HUDSON, JESSICA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD[†]

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126

Effective as of 01-JUL-15

MEHTSUN, WINTA, MD[†]

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

UROLOGY

C1. 網絡內提供者清單 專科護理醫師

ABITBOL, JEAN JACQUES, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123*
Effective as of 01-NOV-21

ANGER, JENNIFER, MD†

Provider ID: N/A

📍 4520 EXECUTIVE DR STE
360
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

ANGER, JENNIFER, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

📍 6699 ALVARADO RD STE
2207
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BUTLER, PHILIP, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

CHEN, TONY, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

COHEN, EDWARD, MD†

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

COHEN, EDWARD, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-NOV-22

DATO, PAUL, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310

C1. 網絡內提供者清單

專科護理醫師

SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DICKS, BRIAN, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123
Effective as of 01-FEB-24

HOLDEN, MARC, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-OCT-22

HOLDEN, MARC, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

JUMA, SAAD, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

KATZ, JONATHAN, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

KEILLER, DANNY, MD†

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

KEILLER, DANNY, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JAN-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-NOV-22

NGUYEN, HUNG, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

PE, MARK-RALLY, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SAIDIAN, AVA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-07

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

SALEM, CAROL, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SALEM, CAROL, MD[†]

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALEM, CAROL, MD[†]

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SALEM, CAROL, MD[†]

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SALEM, CAROL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUN-21

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD[†]

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SHEETZ, TYLER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

UNTERBERG, STEPHEN, MD[†]

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-21

UNTERBERG, STEPHEN, MD[†]

Provider ID: N/A

4060 4TH AVE STE 310

C1. 網絡內提供者清單 專科護理醫師

SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A
☒ 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 4033 3RD AVE STE 400
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

☒ 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A
☒ 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A
☒ 230 PROSPECT PL STE 210
SAN DIEGO, CA 92118
Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YUH, BENJAMIN, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

YUH, BENJAMIN, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

ADDICTIVE MEDICINE

NAFICY, K, MD†

Provider ID: N/A

30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

EMERGENCY MEDICINE

FAHIM, ASHRAF, MD

Provider ID: N/A

27372 CALLE ARROYO
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

FAMILY PRACTICE

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

INTERNAL MEDICINE

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

C1. 網絡內提供者清單 專科護理醫師

STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

NEPHROLOGY

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-14

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-14

OPHTHALMOLOGY

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

C1. 網絡內提供者清單 專科護理醫師

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD

STE 104

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

C1. 網絡內提供者清單

專科護理醫師

SEIDER, TALIA, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

☐ 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

PULMONARY DISEASES

KALE, RAHUL, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-19

KALE, RAHUL, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-23

PATEL, JAY, MD†

Provider ID: N/A

☐ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-OCT-22

REZVAN, KAVEH, DO[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

REZVAN, KAVEH, DO[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOONG, YEN-HUI, MD[†]

Provider ID: N/A

☒ 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-21

YEAM, INCHEL, MD[†]

Provider ID: N/A

☒ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD[†]

Provider ID: N/A

☒ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD[†]

Provider ID: N/A

☒ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD[†]

Provider ID: N/A

☒ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

YEAM, INCHEL, MD[†]

Provider ID: N/A

☒ 31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

SURGERY HAND

SOHN, ROGER, MD[†]

Provider ID: N/A

☒ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SOHN, ROGER, MD[†]

Provider ID: N/A

☒ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SURGERY ORTHOPEDIC

GVOZDYEV, BORYS, MD[†]

Provider ID: N/A

☒ 31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

GVOZDYEV, BORYS, MD[†]

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
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SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE

170

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

C1. 網絡內提供者清單

專科護理醫師

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-20

CARDIAC

ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

DO, HULBERT, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-21

PARIKH, MILIND, DO†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A


955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SARSAM, LUAY, MD


Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23


SHAH, KULIN, MD†

Provider ID: N/A

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23


SHAH, ABHISHEK, MD†

Provider ID: N/A

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A


 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

GONZALEZ, ANDRES, LAC

Provider ID: N/A


 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

CERTIFIED NURSE

PRACTITIONER

ANDREW, SHIRLEY, NP†

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

FAIQ, JAMILA, NP†


Provider ID: N/A

 838 NORDAHL RD STE 300

SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JAN-21


FAIQ, JAMILA, NP†

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-NOV-22


FODDA, RAMI, NPF

Provider ID: N/A

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23


KOHOUT, KATHRYN, NP†

Provider ID: N/A

 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-SEP-22


KROCHMAL, RACHEL, NP

Provider ID: N/A

 120 CRAVEN RD STE 101
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

MAROSOK, MICHELLE, NP


Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice

Effective as of 01-NOV-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice

Effective as of 01-MAR-24

MOONEY, PATRICIA, NP†


Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice

Effective as of 01-JUL-21


MOONEY, PATRICIA, NP†

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-21


MWAURA, WAIRIMU, NP†

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22


MWAURA, WAIRIMU, NP†

Provider ID: N/A

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21


PARSONS, MEKRAE, NP

Provider ID: N/A

 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-DEC-23


VAHDAT, VALERIE, NP†

Provider ID: N/A

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

VICK, ALINA, NP

Provider ID: N/A

 314 S TWIN OAKS VALLEY
RD STE 114
SAN MARCOS, CA 92078

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-NOV-23

WILLEY, MARTI, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JUN-21

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA, CRNM†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

MATEO, MARIE, CRNM†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

CHIROPRACTOR

HINES, TAYTE, DC

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-JAN-24

JEPPESEN, LANCE, DC

Provider ID: N/A

1146 SAN MARINO DR STE L
SAN MARCOS, CA 92078

Effective as of 01-JAN-01

MAUSER, JILL ELLEN, DC

Provider ID: N/A

1146 SAN MARINO DR
SAN MARCOS, CA 92078

Effective as of 01-JUN-21

TRAINER, JASON, DC†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

TRAINER, JASON, DC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-DEC-21

GILBOA, RUTH, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-MAR-17

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-20

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

FAMILY PRACTICE

NATH, DEVARSHI, MD

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

KOSMO, MICHAEL, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

MARJON, PHILIP, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-APR-24

SINCLAIR, JAMES, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-OCT-22

INTERNAL MEDICINE

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078*

Effective as of 01-JAN-21

PONIACHIK, SAMUEL, MD

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUN-23

INTERVENTIONAL CARDIOLOGY

DO, HULBERT, MD†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-22

JOHN, ALAN, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

1510 E MISSION RD STE
RV035
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

MEDICAL ONCOLOGY

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-22

MCCLAY, EDWARD, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-FEB-21

NEPHROLOGY

AFSHAR, MASOUD, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-23

AFSHAR, MASOUD, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-MAY-22

KAYAL, ANAS, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-MAY-22

KAYAL, ANAS, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

NEUROLOGY

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-NOV-21

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

HOSSEIN ZADEH MALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HOSSEIN ZADEH MALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

C1. 網絡內提供者清單 專科護理醫師

Teleservice

Effective as of 01-MAR-24

SILVER, BRENT, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

WU, MELANIE, DO†

Provider ID: N/A

☐ 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

OBSTETRICS / GYNECOLOGY

CIZMAR, BRANISLAV, MD

Provider ID: N/A

☐ 120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Effective as of 01-JAN-24

POUNTNEY, MARLENE, MD†

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-APR-14

POUNTNEY, MARLENE, MD†

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

OPHTHALMOLOGY

GARFF, KEVIN, MD†

Provider ID: N/A

☐ 100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

GUAN, HOWARD, MD

Provider ID: N/A

☐ 100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069

Effective as of 01-FEB-24

PRESTERA, TORY, MD†

Provider ID: N/A

☐ 100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069

Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

☐ 100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069

Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

☐ 100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

PEDIATRICS

LUM HO, RACHEL, MD

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-NOV-23

QUINTERO, CAROLYN, MD

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-APR-24

BERNARDO, RACHELLE, PA

Provider ID: N/A

☐ 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

ESCALANTE, JUVY, PA

Provider ID: N/A

☐ 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-FEB-23

POLLEY, SHANNON, PA

Provider ID: N/A

☐ 150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-MAR-23

SERING, MALIA, PA†

Provider ID: N/A

☐ 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

PODIATRIST

C1. 網絡內提供者清單 專科護理醫師

FARMER, STEVEN, DPM

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

FARMER, STEVEN, DPM

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-APR-24

PSYCHIATRY

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

📍 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PSYCHOLOGIST

CARLTON PENN, CORNELIA, PhD

Provider ID: N/A

📍 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

CARLTON PENN, CORNELIA, PhD

Provider ID: N/A

📍 1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

LOVE, YVONNE, PSYD

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

LOVE, YVONNE, PSYD

Provider ID: N/A

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

SPURRELL, KATHRYN, PT

Provider ID: N/A

📍 2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD†

Provider ID: N/A

📍 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-JUL-22

AL NAHLAWI, BASMA, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

AL NAHLAWI, BASMA, MD[†]

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

AL NAHLAWI, BASMA, MD[†]

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-OCT-21

AL NAHLAWI, BASMA, MD[†]

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

ANESTHESIOLOGY

FONTANA, LOUIS, MD[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD[†]

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

AIZIN, VITALI, MD[†]

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-FEB-21

CERTIFIED NURSE PRACTITIONER

CELIZ, ADRIANA, NP[†]

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DRISCOLL, SUSAN, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

HACINAS, REYNALDO, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

KANTAS, PARIS, NP[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-22

LIEBER, CAROL, NP[†]

Provider ID: N/A

1601 PRECISION PARK LN

SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-21

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD[†]

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-22

ARRIETA, NOEMI, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD[†]

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

DALUGDUGAN, ESTHER, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-NOV-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-JUL-22

ROJAS, STEVEN, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-MAY-23

STALEY, MICHAELA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-NOV-23

VAN PRATT LEVIN, AISHA, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-24

GENERAL PRACTICE

GARCIA-SANDOVAL, DAMARIS, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-NOV-23

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-APR-23

INTERNAL MEDICINE

HURST, MICHAEL, DO†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-SEP-22

LAMANTIA, MICHELE, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-AUG-23

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

JENNINGS, AMY, LCSW†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-SEP-22

LAD, NIKISHA, LCSW

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-APR-24

LOPEZ, MARIBEL, LCSW

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-APR-23

WINSHIP, KATHERINE, LCSW

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-APR-24

MARRIAGE FAMILY THERAPIST

ALVAREZ, IRAIDA, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-DEC-22

BALTRUS, JUSTINE, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-NOV-22

BURCIAGA, HENRY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-OCT-22

JIMENEZ, NANCY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

**C1. 網絡內提供者清單
專科護理醫師**

***NEONATAL / PERINATAL
MEDICINE***

GOMEZ, DANIELA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-OCT-22

GOMEZ, DANIELA, MD

Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-OCT-22

NEPHROLOGY

SOLTERO, RICARDO, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

***OBSTETRICS /
GYNECOLOGY***

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-SEP-21

CARR, MIANDA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

**DANESHMAND, SHAHRAM,
MD†**

Provider ID: N/A

4050 BEYER BLVD

SAN YSIDRO, CA 92173*

Teleservice

Effective as of 01-JUL-22

**DANESHMAND, SHAHRAM,
MD†**

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-SEP-21

DINH, MY, DO†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

**MAJERSKI GONZALEZ,
MANDY, MD†**

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-JUN-21

MENDEZ, DIEGO, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-NOV-21

***OCCUPATIONAL
THERAPIST***

BROWN, JOHNNY, OT

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

OPHTHALMOLOGY

DE SILVA, NIHAL, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PEDIATRICS

DILLON, BENEDICT, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JAN-21

TAYLOR, TASHA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH, PA

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-FEB-22

HARMIS, NATASHA, PA†

Provider ID: N/A

3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173

Teleservice

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAY-21

MARTINEZ MURGUIA, IRENE, PA

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

PORTO MADURSKI, KRISTINE, PA†

Provider ID: N/A

☒ 4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

ROSENBLATT, SHERI, PA†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

SMITH, DOUGLAS, PA†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-21

SUNA SITTO, MOHEEN, PA†

Provider ID: N/A

☒ 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-FEB-21

TRUJILLO, MIGUEL, PA†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

PODIATRIST

MANCHEL, BRUCE, DPM†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MANCHEL, BRUCE, DPM†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PSYCHIATRY

BERGGREN, ERICA, MD†

Provider ID: N/A

☒ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

BERGGREN, ERICA, MD†

Provider ID: N/A

☒ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

JAMES, CHRISTINE, DO

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

JAMES, CHRISTINE, DO

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

OJHA, PRITI, MD

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-23

OJHA, PRITI, MD

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-23

SPEECH PATHOLOGIST

HILL, CARLA, SP†

Provider ID: N/A

☒ 3364 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

ROSENFELD, ALAN, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

C1. 網絡內提供者清單 專科護理醫師

UROLOGY

SALEM, CAROL, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071

Effective as of 01-DEC-22

GASTROENTEROLOGY

REDDY, ANANTHRAM, MD†

Provider ID: N/A

☒ 9456 CUYAMACA ST STE
102
SANTEE, CA 92071

Effective as of 01-JAN-21

REDDY, ANANTHRAM, MD†

Provider ID: N/A

☒ 9456 CUYAMACA ST STE
102
SANTEE, CA 92071

Effective as of 01-JUL-22

INTERNAL MEDICINE

CORBIN, DAVID, MD†

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-NOV-23

PEDIATRICS

IKE, ERICA, DO†

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071

Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

ROSENBLATT, SHERI, PA†

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-OCT-21

PSYCHIATRY

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

☒ 8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

☒ 8770 CUYAMACA ST STE 4
SANTEE, CA 92071

Effective as of 01-MAY-22

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

☒ 9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

☒ 9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

☒ 9830 PROSPECT AVE STE A
SANTEE, CA 92071

Effective as of 01-JAN-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

☒ 9830 PROSPECT AVE STE A
SANTEE, CA 92071

Effective as of 01-JAN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JAN-23

GILBOA, RUTH, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

C1. 網絡內提供者清單
專科護理醫師

GILBOA, RUTH, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

GILBOA, RUTH, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-08

ROSS, ANDREW, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-22

ROSS, ANDREW, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

ROSS, ANDREW, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

THIELE, JENS, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-09

TSE, YARDY, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D

SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-22

VENKAT, ARUN, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

☒ 530 LOMAS SANTA FE DR
STE 8

C1. 網絡內提供者清單 專科護理醫師

SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075*
Effective as of 01-JAN-24

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

BOYDSTON, EMILY, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075

Teleservice

Effective as of 01-APR-24

GIBSON, JULIA, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075

Effective as of 01-MAY-23

LEE, MYUNGHEE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075
Teleservice

Effective as of 01-NOV-23

ROBINSON, JENELLE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8

SOLANA BEACH, CA 92075

Effective as of 01-NOV-23

CERTIFIED NURSE PRACTITIONER

CISTRONE, MONICA, NPF

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-JUL-23

GORDON, DANIELLE, NP†

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE D

SUN CITY, CA 92586

Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD

Provider ID: N/A

28071 BRADLEY RD
SUN CITY, CA 92586

Effective as of 01-JUN-23

CARDIOVASCULAR

DISEASE

AGGARWAL, SAURABH, MD†

Provider ID: N/A

26962 CHERRY HILLS
BLVD STE A

SUN CITY, CA 92586

Effective as of 01-DEC-21

SARSAM, SINAN, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C

SUN CITY, CA 92586

Effective as of 01-JUN-21

CERTIFIED NURSE PRACTITIONER

SHIH, LU-HSUN, NP

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A

SUN CITY, CA 92586

Effective as of 01-APR-24

GASTROENTEROLOGY

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD

SUN CITY, CA 92586

Effective as of 01-FEB-11

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD

SUN CITY, CA 92586

Effective as of 01-SEP-09

**C1. 網絡內提供者清單
專科護理醫師**

***MARRIAGE FAMILY
THERAPIST***

PORTER, TERRY, MFT†

Provider ID: N/A

☐ 28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

PORTER, TERRY, MFT†

Provider ID: N/A

☐ 28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

NEPHROLOGY

ISHAK, SALAM, MD†

Provider ID: N/A

☐ 28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-SEP-12

ISHAK, SALAM, MD†

Provider ID: N/A

☐ 28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-JUN-12

OPHTHALMOLOGY

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

☐ 28125 BRADLEY RD STE 189
SUN CITY, CA 92586
Effective as of 01-FEB-11

OPTOMETRIST

LANE, KEVIN, OD†

Provider ID: N/A

☐ 29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☐ 26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☐ 26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☐ 26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

ALLERGY IMMUNOLOGY

GUPTA, SAMEER, MD†

Provider ID: N/A

☐ 41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-DEC-21

GUPTA, SAMEER, MD†

Provider ID: N/A

☐ 41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-FEB-15

GUPTA, SAMEER, MD†

Provider ID: N/A

☐ 41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-JAN-16

GUPTA, SAMEER, MD†

Provider ID: N/A

☐ 41715 WINCHESTER RD STE
206
TEMECULA, CA 92590
Effective as of 01-JUL-23

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

☐ 28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD†

Provider ID: N/A

☐ 27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

☐ 27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

☐ 28975 OLD TOWN FRONT

C1. 網絡內提供者清單 專科護理醫師

ST STE 200
TEMECULA, CA 92590
Effective as of 01-OCT-19

KANU, ABDUL, MD

Provider ID: N/A

27699 JEFFERSON AVE
TEMECULA, CA 92590

Teleservice

Effective as of 01-AUG-20

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-SEP-19

CHEN, HAMILTON, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591

Effective as of 01-SEP-23

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-SEP-19

DADACHANJI, CYRUS, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUL-23

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590

Effective as of 01-JUL-17

GUIANG, RAINIER, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591

Effective as of 01-SEP-23

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591

Effective as of 01-MAR-24

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-SEP-19

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-MAY-18

MOELLER-BERTRAM, TOBIAS, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
201

TEMECULA, CA 92590
Effective as of 01-JUN-18

CARDIOVASCULAR DISEASE

ALFAY, WISAM, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
290

TEMECULA, CA 92590

Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

AMIN, JATIN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JUL-22

BISWAS, MIMI, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-MAR-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-MAY-21

PAREKH, NIRAJ, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

PAREKH, NIRAJ, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-FEB-22

SANGODKAR, SANDEEP, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

CERTIFIED ACUPUNCTURIST

LEE, KYUNG, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590

Effective as of 01-MAR-21

LEE, KYUNG, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590

Effective as of 01-MAR-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N

TEMECULA, CA 92590

Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-OCT-22

CERTIFIED NURSE PRACTITIONER

AGORRILLA, MARIA, NP

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592

Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP

Provider ID: N/A

27555 YNEZ RD STE 102
TEMECULA, CA 92591

Effective as of 01-FEB-24

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

BEDFORD, RONALD, NPT

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NPT

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

GEISINGER, TERESA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-23

HARTMAN, JULIE, NPF

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592
Effective as of 01-OCT-22

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-24

HUERTA, CARMEN, NPT

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

HUERTA, CARMEN, NPT

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

HUERTA, CARMEN, NPT

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE

101

TEMECULA, CA 92592
Effective as of 01-FEB-24

LUCACI, BIANCA, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-SEP-22

ONUOHA, NOJA, NPT

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

ONUOHA, NOJA, NPT

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*
Effective as of 01-NOV-22

SMITH, PAIGE, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-OCT-23

THOMAS, STEPHEN, NPT

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-22

THOMAS, STEPHEN, NPT

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

THOMAS, STEPHEN, NPT

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-23

ZELEDON, JAIME, NP

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591
Effective as of 01-JUN-23

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-97

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-JAN-22

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE

MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

KHERADMANT, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-FEB-22

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

C1. 網絡內提供者清單 專科護理醫師

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MUNYON, THOMAS, MD†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAR-24

ROSS, ANDREW, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-22

SAIED, NAGI, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-23

EMERGENCY MEDICINE

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-SEP-22

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-21

ENDOCRINOLOGY METABOLISM DIABETES

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUL-23

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591
Effective as of 01-JUN-16

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-FEB-17

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-FEB-17

FAMILY PRACTICE SPORTS MEDICINE

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

GASTROENTEROLOGY

ARDIGO, GREGORY, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

DINH, JACK, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

KEMMERLY, THOMAS, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAR-24

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD

SUITE 101
TEMECULA, CA 92592
Effective as of 01-DEC-22

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101
TEMECULA, CA 92592
Effective as of 01-NOV-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

TEYMOORIAN, ARIAN, MD

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

HEMATOLOGY / ONCOLOGY

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 202
TEMECULA, CA 92592
Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

INTERNAL MEDICINE

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-OCT-22

**AL HARASH, ABDALHAMID,
MD†**

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-OCT-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201

TEMECULA, CA 92592
Effective as of 01-MAR-21

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JAN-22

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-SEP-22

JACOBS, NATALIA, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAY-23

WHITE, XUANHA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-FEB-22

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

SALEK, MUNIF, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-JAN-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-MAR-22

INTERVENTIONAL CARDIOLOGY

MESSENGER, BRADLEY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SEAMAN, CHRISTOPHER, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

LICENSED CLINICAL SOCIAL WORKER

CARTWRIGHT, SHANIQUA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

LURINKS GARCIA, MARIA,

LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☒ 29645 RANCHO CALIFORNIA RD STE 213 TEMECULA, CA 92591

Effective as of 01-JAN-23

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

☒ 31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592

Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-APR-15

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-JUL-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-MAR-21

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Effective as of 01-AUG-20

YAN, ERIC, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A

☒ 31537 RANCHO PUEBLO RD STE 201 TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

C1. 網絡內提供者清單

專科護理醫師

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

NEUROLOGY

CHOUdry, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

CHOUdry, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 104
TEMECULA, CA 92592
Effective as of 01-JUN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAR-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-23

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-NOV-22

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-APR-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 104
TEMECULA, CA 92592
Effective as of 01-APR-24

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

Effective as of 01-OCT-19

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-21

HALL, JACOB, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 104
TEMECULA, CA 92592

Effective as of 01-JAN-21

HOSSEIN ZADEH MALEKI, ANA, MD

Provider ID: N/A

44045 MARGARITA RD STE 106
TEMECULA, CA 92592

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

☐ 31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-24

HUOTT, PATRICK, MD

Provider ID: N/A

☐ 31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-24

MAREK, MAKSYM, MD

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-DEC-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-JUL-23

PHAM, ALISE, DO

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-DEC-23

SAHAGIAN, GREGORY, MD

Provider ID: N/A

☐ 31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

SILVER, BRENT, MD†

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-NOV-22

SORIA LOPEZ, JOSE, MD†

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-MAR-21

TALANKI, VARUN, MD

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592

Effective as of 01-DEC-22

WU, MELANIE, DO†

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-JAN-20

NEUROLOGY CHILD

OLENSKI, KLARI, DO†

Provider ID: N/A

☐ 44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-MAR-22

OBSTETRICS / GYNECOLOGY

ELFELT, TIMOTHY, MD†

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

Effective as of 01-AUG-19

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590

Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

☐ 27625 JEFFERSON AVE STE
101
TEMECULA, CA 92590

Effective as of 01-JUL-21

NEAL, JAMES, MD†

Provider ID: N/A

☐ 31170 TEMECULA PKWY
STE 201
TEMECULA, CA 92592

Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

☐ 31493 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-22

OPHTHALMOLOGY

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-SEP-21

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-SEP-21

BEKENDAM, PAMELA, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PETER, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

BEKENDAM, PETER, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PETER, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BIRO, NICOLAS, MD

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

BIRO, NICOLAS, MD

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-JUN-23

BURNS, RICHARD, MD†

Provider ID: N/A

☐ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

BURNS, RICHARD, MD†

Provider ID: N/A

☐ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-08

BURNS, RICHARD, MD†

Provider ID: N/A

☐ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-SEP-09

CHING, ANDREA SHERYL, MD†

Provider ID: N/A

☐ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

CHOW, JASON, MD†

Provider ID: N/A

☐ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

ISSA, REDA, MD†

Provider ID: N/A

☐ 41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-DEC-21

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 31950 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-23

LAZZARINI, THOMAS, MD

Provider ID: N/A

☐ 41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☐ 41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☐ 41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

☐ 41900 WINCHESTER RD
STE 201

C1. 網絡內提供者清單 專科護理醫師

TEMECULA, CA 92590
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201

TEMECULA, CA 92590
Effective as of 01-SEP-17

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201

TEMECULA, CA 92590
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201

TEMECULA, CA 92590
Effective as of 01-APR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-DEC-23

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-AUG-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-AUG-20

SHEILS, CATHERINE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-JAN-24

SHELTON, RAYMOND, MD

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591
Effective as of 01-MAY-23

SMITH, WILLIAM, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N

STE 110

TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-AUG-20

SONI, NISHANT, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-AUG-23

SORENSON, ROBERT, MD†

Provider ID: N/A

31950 US HWY 79 S B7
TEMECULA, CA 92592

Effective as of 01-JUL-23

WARNER, MICHAEL, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100

TEMECULA, CA 92591

Teleservice

Effective as of 01-JUL-23

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-NOV-20

YUNG, EDWARD, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-AUG-20

C1. 網絡內提供者清單

專科護理醫師

ZHOU, SIWEI, MD†

Provider ID: N/A

☞ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

☞ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

AZIZ AWAD AWADALLA, MARINAEMAD, OD†

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

AZIZ AWAD AWADALLA, MARINAEMAD, OD†

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22

AZIZ AWAD AWADALLA, MARINAEMAD, OD†

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110

TEMECULA, CA 92590
Effective as of 01-FEB-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

☞ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

☞ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-SEP-22

FARAMARZI, FARNAZ, OD

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

FARAMARZI, FARNAZ, OD

Provider ID: N/A

☞ 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

☞ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A

☞ 41637 MARGARITA RD STE

C1. 網絡內提供者清單 專科護理醫師

100
TEMECULA, CA 92591
Effective as of 01-FEB-11

LARSON, BRETT, OD†

Provider ID: N/A
☒ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A
☒ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A
☒ 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

MCINTYRE, DEBRA, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-DEC-17

ULIBARRI, MATTHEW, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A
☒ 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JAN-22

OTOLARYNGOLOGY

GIAMMANCO, PIERRE, MD

Provider ID: N/A
☒ 27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

GIAMMANCO, PIERRE, MD

Provider ID: N/A
☒ 27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590
Effective as of 01-SEP-22

TINT, DERRICK, MD†

Provider ID: N/A
☒ 40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-21

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A
☒ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A
☒ 27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

ASHIER, SAURABH, PA†

Provider ID: N/A
☒ 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

ASHIER, SAURABH, PA†

Provider ID: N/A
☒ 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A
☒ 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

BAKER, ROBERT, PA

Provider ID: N/A
☒ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

C1. 網絡內提供者清單 專科護理醫師

BAKER, ROBERT, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BASIN, NATALIE, PA

Provider ID: N/A

☐ 31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

Teleservice

Effective as of 01-AUG-23

CAGATAY, HARRIER, PA†

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-AUG-20

FELIX, FRANCISCO, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-AUG-23

FELIX, FRANCISCO, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-AUG-23

LYNCH, GREGORY, PA†

Provider ID: N/A

☐ 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

☐ 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

☐ 31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, PAUL, PA

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

ROWAN, RYAN, PA†

Provider ID: N/A

☐ 44054 MARGARITA RD STE
1

TEMECULA, CA 92592

Effective as of 01-MAR-23

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JUL-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

☐ 41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

☐ 29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213

TEMECULA, CA 92591

Effective as of 01-OCT-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUL-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-JUL-23

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-AUG-20

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592
Effective as of 01-DEC-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

PSYCHOLOGIST

C1. 網絡內提供者清單 專科護理醫師

THODE, LAURA, PSYD

Provider ID: N/A

31720 TEMECULA PKWY
STE 200
TEMECULA, CA 92592
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

31720 TEMECULA PKWY
STE 200
TEMECULA, CA 92592
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N

TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

PULMONARY DISEASES

CHUA, WILLY, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE

204

TEMECULA, CA 92590
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-JUL-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-AUG-22

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-NOV-21

AGENA, CYAN, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE

C1. 網絡內提供者清單
專科護理醫師

202
 TEMECULA, CA 92590
 Effective as of 01-NOV-21

ATKINS, WILLIAM, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUN-23

BRYANS, BRIANNA, PT†

Provider ID: N/A
 29645 RANCHO CALIFORNIA RD
 TEMECULA, CA 92591
 Effective as of 01-JAN-22

BRYANS, BRIANNA, PT†

Provider ID: N/A
 29645 RANCHO CALIFORNIA RD
 TEMECULA, CA 92591
 Effective as of 01-JAN-22

BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-SEP-23

BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-SEP-23

ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A

27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

ESTELLE, KIRA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-MAY-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUL-23

HANSON, ADRIENNE, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUL-23

HORN, TREVOR, PT†

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-APR-20

HORN, TREVOR, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-APR-20

ROLTSCH, IAN, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-MAY-23

ROLTSCH, IAN, PT

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-MAY-23

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-FEB-19

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
 STE 101
 TEMECULA, CA 92592

Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 4

TEMECULA, CA 92591

Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 4
 TEMECULA, CA 92591

Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 234
 TEMECULA, CA 92591

Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 234
 TEMECULA, CA 92591

Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE
 202
 TEMECULA, CA 92590

Effective as of 01-NOV-21

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 234
 TEMECULA, CA 92591

Effective as of 01-JUN-20

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO
 CALIFORNIA RD STE 234
 TEMECULA, CA 92591

Effective as of 01-JUN-20

C1. 網絡內提供者清單 專科護理醫師

VIZCARRA, DAVID, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-20

VIZCARRA, DAVID, PT†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-20

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

BRAVO, ARLENE, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

PHILLPOTTS, MARC, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-22

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO


C1. 網絡內提供者清單

專科護理醫師

RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15


GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

SURGERY GENERAL


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592
Effective as of 01-MAY-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21


DADA, STEPHEN, MD

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-23


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-15


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO

C1. 網絡內提供者清單

專科護理醫師

RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-17

MAC, OLIVIA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-NOV-22

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-FEB-24

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-18

C1. 網絡內提供者清單
專科護理醫師

VU, STEVE, MD

Provider ID: N/A

☞ 27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

☞ 27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

☞ 27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

☞ 27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, NAN, MD†

Provider ID: N/A

☞ 31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-22

WANG, XIUJIE, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAR-20

WANG, XIUJIE, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

WANG, NAN, MD†

Provider ID: N/A

☞ 31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

WANG, XIUJIE, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

SURGERY GENERAL
VASCULAR

GORSKI, YARA, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUN-15

GORSKI, YARA, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

GREWAL, PRABHJOT, MD†

Provider ID: N/A

☞ 27290 MADISON AVE STE 102
TEMECULA, CA 92590
Effective as of 01-NOV-20

GREWAL, PRABHJOT, MD†

Provider ID: N/A

☞ 27290 MADISON AVE STE 102
TEMECULA, CA 92590
Effective as of 01-JUN-20

KARMUR, AMIT, DO†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

TIU, BRIAN, MD†

Provider ID: N/A

☞ 31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

WANG, XIUJIE, MD[†]

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

WANG, XIUJIE, MD[†]

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-OCT-20

WANG, XIUJIE, MD[†]

Provider ID: N/A

☐ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-OCT-20

SURGERY HAND

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE

270

TEMECULA, CA 92590

Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD[†]

Provider ID: N/A

☐ 28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590

Effective as of 01-JUN-22

AMERI, BIJAN, DO

Provider ID: N/A

☐ 28780 SINGLE OAK DR STE
270

C1. 網絡內提供者清單
專科護理醫師

TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUN-21

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-SEP-22

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-OCT-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-21

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUN-21

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-DEC-22

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-DEC-22

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-DEC-22

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590*
 Effective as of 01-JUL-20

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-JUL-16

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
 STE A
 TEMECULA, CA 92590
 Effective as of 01-SEP-22

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
 STE A
 TEMECULA, CA 92590
 Effective as of 01-SEP-22

MARGER, MICHAEL, MD†

Provider ID: N/A

27455 TIERRA ALTA WAY
 STE A
 TEMECULA, CA 92590
 Effective as of 01-SEP-22

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270

TEMECULA, CA 92590
 Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
 270
 TEMECULA, CA 92590
 Effective as of 01-FEB-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591*
 Effective as of 01-JUL-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591
 Effective as of 01-JUN-21

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
 TEMECULA, CA 92591*

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591*

Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591*

Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAR-23

ROSENBERG, GARY, DO

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROWSHAN, KASRA, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

📍 31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-22

THOLCKE, LOREN, DO

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-AUG-23

THOLCKE, LOREN, DO

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

📍 40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

UPPAL, GURVINDER, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

📍 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

📍 27699 JEFFERSON AVE STE
201

C1. 網絡內提供者清單 專科護理醫師

TEMECULA, CA 92590
Effective as of 01-APR-20

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-19

MUDGE, BRADLEY, MD†

Provider ID: N/A

☐ 44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-19

URIAS, DANIEL, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-APR-24

VU, STEVE, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUN-23

VU, STEVE, MD

Provider ID: N/A

☐ 27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590

Effective as of 01-JUN-23

SURGERY THORACIC

BANSAL, NEERAJ, MD

Provider ID: N/A

☐ 31573 RANCHO PUEBLO

RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

BANSAL, NEERAJ, MD

Provider ID: N/A

☐ 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-MAY-23

RASI, ALFREDO, MD†

Provider ID: N/A

☐ 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592

Effective as of 01-NOV-20

UROLOGY

CONNER, RICHARD, MD†

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592

Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592

Effective as of 01-MAY-20

LUTTGE, SCOTT, MD

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592

Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 102B

TEMECULA, CA 92592
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

☐ 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592

Effective as of 01-MAY-22

FAMILY PRACTICE

RAY, ANNE, MD

Provider ID: N/A

☐ 31951 DOVE CANYON DR
TRABUCO CANYON, CA
92679

Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-JUL-22

ONEILL, THERESE, CRNM

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-NOV-23

FAMILY PRACTICE

CASTANER, ZALYA, MD†

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Teleservice

Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PATEL, RAKESH, MD

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

SCHULTZ, JAMES, MD

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

PHYSICIANS ASSISTANT

AGUEY, OMAR, PA[†]

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*

Effective as of 01-FEB-24

AGUEY, OMAR, PA[†]

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Effective as of 01-DEC-20

WICKWARE, TRACY, PA

Provider ID: N/A

☐ 28477 LIZARD ROCKS RD

VALLEY CENTER, CA 92082

Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

VOLPP, HEATHER, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-MAR-14

VOLPP, HEATHER, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY
VISTA, CA 92083

Effective as of 01-JAN-24

ZIERING, ROBERT, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-JUL-01

ZIERING, ROBERT, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-21

ZIERING, ROBERT, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-22

ZIERING, ROBERT, MD[†]

Provider ID: N/A

☐ 2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-AUG-20

CARDIAC

ELECTROPHYSIOLOGY

BUI, HANH, MD

Provider ID: N/A

☐ 906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

CARDIOVASCULAR DISEASE

BUI, HANH, MD

Provider ID: N/A

☐ 906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

DO, HULBERT, MD[†]

Provider ID: N/A

☐ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

DO, HULBERT, MD[†]

Provider ID: N/A

☐ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO[†]

Provider ID: N/A

☐ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

MOUSSAVIAN, MEHRAN, DO[†]

Provider ID: N/A

☐ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-OCT-21

PARIKH, MILIND, DO[†]

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-JAN-24

CERTIFIED

ACUPUNCTURIST

SCARLETT, YVONNE, LAC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

SONG, CAROL, LAC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CERTIFIED NURSE

PRACTITIONER

ALVAREZ, LISA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

ALVAREZ, LISA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-OCT-21

AYELE, MAHOGANY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

BAEZ, ELIZABETH, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BATES, TYLER, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAR-23

BJORNSON, MICHELE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BRAAMSE, CHLOE, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice

Effective as of 01-JUN-23

CARDINELL, ANNA, NP†

Provider ID: N/A

910 SYCAMORE AVE STE
270

VISTA, CA 92081
Effective as of 01-AUG-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

CHATHAM, OLIVIA, NP†

Provider ID: N/A

950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-22

CHATHAM, OLIVIA, NP†

Provider ID: N/A

950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-MAY-21

CHILAKA, SAMUEL, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CHILAKA, SAMUEL, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

517 N HORNE ST
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CLARK, CYNTHIA, NP†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CROTTEAU, ALEX, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

DEKKERS-O'HARE, INGRID, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HALGEDAHL, YI, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

HALGEDAHL, YI, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

JONES, STACY, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

KESSLER, JENNIFER, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081

Effective as of 01-JUL-21

MERRITT, MARISA, NP

Provider ID: N/A

📍 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-AUG-22

NAVA, PETER, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

NICHOLAS, ESTELA, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

PATEMAN, CAROLYN, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

ROSS, BRIDGET, NPF

Provider ID: N/A

📍 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-DEC-21

SCHAEPE, RHODORA, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-24

SERRATO, ANTHONY, NP

Provider ID: N/A

📍 906 SYCAMORE AVE STE
104
VISTA, CA 92081

Effective as of 01-MAY-23

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A

📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081

Effective as of 01-JUL-21

TABARANZA, PHOEBE, NPF

Provider ID: N/A

📍 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-OCT-22

WAGNER, TASIA, NP

Provider ID: N/A

📍 105 DURIAN ST
VISTA, CA 92083

Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

WILLIAMS, JINA, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-SEP-22

WINDHAM, SUZONNE, NP

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

YOUNG, JENNIFER, NPF

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

OLSON, ROBERT, DC

Provider ID: N/A

906 SYCAMORE AVE STE
210
VISTA, CA 92081
Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24

HENDERSON, GREGORY, MD†

Provider ID: N/A

1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-SEP-21

HENDERSON, GREGORY, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

2395 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

STEIN, ALEXANDER, MD

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-JUL-23

EMERGENCY MEDICINE

ZIMMERMAN, DAVID, MD

Provider ID: N/A

145 THUNDER DR
VISTA, CA 92083*
Effective as of 01-MAY-24

FAMILY PRACTICE

DONNELL, MARTI, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-NOV-23

DONNELL, MARTI, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-NOV-23

HIKES, RYAN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-22

MARTINEZ, LESLY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-APR-23

MARTINEZ, LESLY, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-APR-23

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Teleservice
Effective as of 01-MAR-24

PUDOL, CHRISTOPHER, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Teleservice
Effective as of 01-MAR-24

TRAN, DAO, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

TRAN, DAO, DO

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-MAY-23

VIDAL, MONICA, DO[†]

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-AUG-22

VIDAL, MONICA, DO[†]

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-AUG-22

GENERAL PRACTICE

TANUS, DEBORAH, DO

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-NOV-23

WALKER, BRADLEY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-MAY-23

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD[†]

Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD[†]

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

1250 SUNSET DR STE 101
VISTA, CA 92081

Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-JUL-22

MARJON, PHILIP, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-JUL-22

MARJON, PHILIP, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*

Effective as of 01-APR-23

PARSI, HOOMAN, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-JUL-23

SARWARI, NAWID, MD

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*

Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083

Effective as of 01-JUL-23

SUBRAMANIAN, RUPA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-AUG-20

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

HOSPITALIST MD/DO

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

INTERVENTIONAL CARDIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104

VISTA, CA 92081

Teleservice

Effective as of 01-JAN-24

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KABRA, ASHISH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104

VISTA, CA 92081

Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

PARKS, MONICA, MD

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

LICENSED CLINICAL SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

CRUZ, VANESSA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JUN-23

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAPPONE, ALIDA, LCSW
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

GROVE, VICKI, MFT
Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

ARRIETA, IRIS, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

ARRIETA, IRIS, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

BINDER, PRATIBHA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

DIETERICH, FREDERICK, MD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-14

HAWKINS, MELISSA, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KARANIKKIS, CHRISTOS, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KARANIKKIS, CHRISTOS, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-18

KARANIKKIS, CHRISTOS, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MD†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-21

LEONARD, LISA, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-APR-12

MAZAREI, RAHELE, DO

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SUNTAY, BERK, MD

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

OCCUPATIONAL THERAPIST

CHAVEZ SERRANO, VIOLETA, OT

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083
Effective as of 01-FEB-24

OPHTHALMOLOGY

AMINLARI, ARDALAN, MD

Provider ID: N/A

1930 VIA CENTRE DR
VISTA, CA 92081
Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-NOV-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-FEB-21

JOHNSTON, ERIC, MD

Provider ID: N/A

1930 VIA CTR
VISTA, CA 92081
Effective as of 01-SEP-21

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JUN-23

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JUL-23

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-MAR-14

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-SEP-21

OPTOMETRIST

AZIMI, SHERRI, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JAN-21

BLOOMBERG, DAVID, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JAN-21

GARDNER, KRISTA, OD†

Provider ID: N/A

C1. 網絡內提供者清單

專科護理醫師

2067 W VISTA WAY STE 120
VISTA, CA 92083
Effective as of 01-JAN-21

GEE, JENNIFER, OD
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

GEE, JENNIFER, OD
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

GEE, JENNIFER, OD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

GEE, JENNIFER, OD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

GEE, JENNIFER, OD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

KASAI, SARAH, OD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KIM, MICHAEL, OD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-21

KOUCHAK, YASMIN, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083
Teleservice
Effective as of 01-JUL-23

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice
Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-22

C1. 網絡內提供者清單 專科護理醫師

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

TANG, ASHLEY, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-21

TRAN, JESSICA, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

OTOLARYNGOLOGY

BERRY, JULIE, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-OCT-17

PEDIATRICS

KAISER, EMILY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*

Effective as of 01-JAN-24

RONAN, KEVIN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

RONAN, KEVIN, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KUPIS, ROBERT, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

LEPARD, KRISTINA, PA

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAR-23

THEPVONGSA, MELISSA, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

WALLACE, STEPHANIE, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

WEAVER, APRIL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

WEAVER, APRIL, PA

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-OCT-21

PODIATRIST

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

MILLER, JULIE, DPM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-APR-24

MILLER, JULIE, DPM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

C1. 網絡內提供者清單
專科護理醫師

PREVENTATIVE MEDICINE
GENERAL

DEPORTO, TANYA, MD

Provider ID: N/A

☒ 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-MAY-21

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

☒ 134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

WALKER, BRADLEY, MD

Provider ID: N/A

☒ 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

PULMONARY DISEASES

HSING, ANDREW, MD

Provider ID: N/A

☒ 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-JAN-24

HSING, ANDREW, MD

Provider ID: N/A

☒ 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

MAGANA, MARISA, MD

Provider ID: N/A

☒ 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-24

PINO, ALEJANDRO, MD

Provider ID: N/A

☒ 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-FEB-23

ZHANG, MICHELLE, MD

Provider ID: N/A

☒ 2067 W VISTA WAY STE D
VISTA, CA 92083

Effective as of 01-SEP-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD

Provider ID: N/A

☒ 906 SYCAMORE AVE STE
100
VISTA, CA 92081

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-21

BOUCHARD, REID, PT

Provider ID: N/A

📍 1958 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-OCT-21

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-24

DOULL, MATTHEW, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

PENNINGTON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

ANSARI, RASHAD, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-JUL-22

ANSARI, RASHAD, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-SEP-21

BEJKO, ETELEVA, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE H
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-21

BEJKO, ETELEVA, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE H

VISTA, CA 92083

Teleservice

Effective as of 01-DEC-21

BRION, PAUL, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE H
VISTA, CA 92083

Effective as of 01-SEP-21

BRION, PAUL, MD†

Provider ID: N/A

📍 2023 W VISTA WAY STE H
VISTA, CA 92083

Effective as of 01-JUL-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081

Effective as of 01-JUL-21

GROVE, JAY, MD†

Provider ID: N/A

📍 2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-SEP-21

GROVE, JAY, MD†

Provider ID: N/A

📍 2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-JAN-21

GROVE, JAY, MD†

Provider ID: N/A

📍 2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A

C1. 網絡內提供者清單 專科護理醫師

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

HANNA, KAREN, MD†

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

SURGERY NEUROLOGICAL

STERN, MARK, MD

Provider ID: N/A

326 S MELROSE DR STE
200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD†

Provider ID: N/A

161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-22

ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE, JESSICA, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

THOMAS, STEPHEN, NPF†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC

Provider ID: N/A

32475 CLINTON KEITH RD
STE 108
WILDOMAR, CA 92595
Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280

**C1. 網絡內提供者清單
專科護理醫師**

WILDOMAR, CA 92595
Effective as of 01-MAR-19

INTERNAL MEDICINE

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAR-19

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAY-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-JUN-15

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-OCT-19

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAR-19

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAR-21

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

JAFFE, GILAD, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-SEP-23

PATEL, SAGAR, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

**LICENSED CLINICAL
SOCIAL WORKER**

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JAN-23

NEPHROLOGY

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595

C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAY-23

CHANG, DAVID, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAY-15

CHANG, DAVID, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAY-09

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-NOV-16

LAC, PETER, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-NOV-19

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-JUL-23

LAC, PETER, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-MAR-21

NANDI, SHANKHA, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595

Effective as of 01-JUN-23

C1. 網絡內提供者清單
專科護理醫師

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR

STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-19

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-AUG-20

NANDI, SHANKHA, DO

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

WANG, WENG-LIH, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

WANG, WENG-LIH, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JAN-20

WANG, WENG-LIH, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

WANG, WENG-LIH, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-09

WANG, WENG-LIH, MD†

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

WANG, WENG-LIH, MD

Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

WANG, WENG-LIH, MD


Provider ID: N/A

☐ 36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

WANG, WENG-LIH, MD†


Provider ID: N/A

C1. 網絡內提供者清單
專科護理醫師

 36320 INLAND VALLEY DR
 STE 308
 WILDOMAR, CA 92595
 Effective as of 01-MAR-21


YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595
 Effective as of 01-DEC-23

YU, JERRY, MD


Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 307
 WILDOMAR, CA 92595
 Effective as of 01-DEC-23

PSYCHIATRY


JAKKULA, JAGAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-NOV-23


JAKKULA, JAGAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUL-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†


Provider ID: N/A

 36320 INLAND VALLEY DR

STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUL-22


KANUKUNTLA, TULASI, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUL-22


KANUKUNTLA, TULASI, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-OCT-23


KANUKUNTLA, TULASI, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUL-22


KANUKUNTLA, TULASI, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-OCT-23


KUNAM, SYAM, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUN-23


KUNAM, SYAM, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-NOV-23


KUNAM, SYAM, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-NOV-23


KUNAM, SYAM, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-JUN-23


PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-SEP-23


PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595
 Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 300
 WILDOMAR, CA 92595
 Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
 STE 303
 WILDOMAR, CA 92595

C1. 網絡內提供者清單 專科護理醫師

Effective as of 01-AUG-22

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 300
WILDOMAR, CA 92595

Effective as of 01-AUG-22

PULMONARY DISEASES

KUMAR, AVNEE, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-JUL-23

SURI, RAJAT, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

RADIATION ONCOLOGY

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-SEP-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-DEC-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUL-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

LAWRENSON, LESLEY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-NOV-23

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-MAR-10

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-14

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595

Effective as of 01-JUN-23

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR

C1. 網絡內提供者清單
專科護理醫師

STE 105
WILDOMAR, CA 92595
Effective as of 01-MAR-19

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 105
WILDOMAR, CA 92595
Effective as of 01-AUG-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-NOV-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

ATTOBRA, TATIANA, RD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 301
WILDOMAR, CA 92595
Effective as of 01-DEC-22

**REGISTERED PHYSICAL
THERAPIST**

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110
WILDOMAR, CA 92595
Effective as of 01-JUL-19

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-JUL-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

SPEECH PATHOLOGIST

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E
WILDOMAR, CA 92595
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E
WILDOMAR, CA 92595
Effective as of 01-JUN-22

**SURGERY COLON
SURGERY**

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

SURGERY GENERAL

C1. 網絡內提供者清單 專科護理醫師

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595

Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

C1. 網絡內提供者清單 專科護理醫師

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

CORDERO, RAYMUND, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-21

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-24

DEARING, DAVID, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-DEC-12

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

C1. 網絡內提供者清單
專科護理醫師

WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

HUSTED, JOHN, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280

WILDOMAR, CA 92595
Effective as of 01-MAR-13

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAR-19

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-17

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR

STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-SEP-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

C1. 網絡內提供者清單
專科護理醫師

KARMUR, AMIT, DO⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-JAN-22

LEE, JENNY, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-MAR-19

MAC, OLIVIA, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-APR-23

MAC, OLIVIA, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-DEC-22

MAC, OLIVIA, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-MAR-23

MAC, OLIVIA, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595
 Effective as of 01-MAR-23

NAFIU, BOLAJI, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101
 WILDOMAR, CA 92595

Effective as of 01-FEB-23

Effective as of 01-SEP-22

NAFIU, BOLAJI, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-NOV-22

Effective as of 01-DEC-19

NAFIU, BOLAJI, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-NOV-22

Effective as of 01-APR-20

NAFIU, BOLAJI, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-SEP-22

Effective as of 01-JAN-20

NOURI, SARVENAZ, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-AUG-18

Effective as of 01-JAN-23

NOURI, SARVENAZ, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-DEC-21

Effective as of 01-JAN-23

NOURI, SARVENAZ, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

Effective as of 01-MAR-20

NOURI, SARVENAZ, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

NOURI, SARVENAZ, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

TIU, BRIAN, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101
 WILDOMAR, CA 92595

TIU, BRIAN, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101
 WILDOMAR, CA 92595

WANG, XIUJIE, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

WANG, XIUJIE, MD⁺

Provider ID: N/A

36320 INLAND VALLEY DR
 STE 101A
 WILDOMAR, CA 92595

WANG, XIUJIE, MD⁺

C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-19

SURGERY GENERAL
VASCULAR

GORSKI, YARA, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

GORSKI, YARA, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

GORSKI, YARA, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-16

GORSKI, YARA, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-16

GORSKI, YARA, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAR-19

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JUL-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

31537 INLAND VALLEY DR,
STE 202
WILDOMAR, CA 92595

Effective as of 01-JAN-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-JAN-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-DEC-21

NAFIU, BOLAJI, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-MAR-19

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD[†]

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-MAY-19

C1. 網絡內提供者清單

專科護理醫師

WANG, XIUJIE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595

Effective as of 01-OCT-20

WANG, XIUJIE, MD†



Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595



Effective as of 01-OCT-20

C3. 專業護理機構 (SNF)



CAPISTRANO BEACH CARE CENTER

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-AUG-14



CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-JAN-12



BAYSHIRE CARLSBAD

 3140 EL CAMINO REAL
CARLSBAD, CA 92008
 (760) 720-9898
Effective as of 01-JUL-22



LAS VILLAS DE CARLSBAD OPERATIONS LLC

 1088 LAGUNA DR
CARLSBAD, CA 92008
 (760) 434-7116
Effective as of 01-FEB-13



SOUTH BAY POST ACUTE CARE

 553 F ST
CHULA VISTA, CA 91910
 (619) 426-8611
Effective as of 01-NOV-19



AVOCADO POST ACUTE

 510 E WASHINGTON AVE
EL CAJON, CA 92020
 (619) 440-1211
Effective as of 01-JAN-20



BRADLEY COURT SPECIAL CARE CENTER

 675 E BRADLEY AVE
EL CAJON, CA 92021
 (619) 448-6633
Effective as of 01-DEC-21



COTTONWOOD CANYON HEALTHCARE CENTER

 1391 E MADISON AVE
EL CAJON, CA 92021
 (619) 444-1107
Effective as of 01-OCT-11



COUNTRY HILLS POST ACUTE

 1580 BROADWAY
EL CAJON, CA 92021
 (619) 441-8745
Effective as of 15-NOV-20



MAGNOLIA POST ACUTE CARE

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (616) 442-8826
Effective as of 01-NOV-19



MAGNOLIA SPECIAL CARE CENTER

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

MAGNOLIA SPECIAL CARE CTR



 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER



 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE



CENTER

 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-JAN-12



SAN DIEGO POST ACUTE CENTER

 1201 S ORANGE AVE
EL CAJON, CA 92020
 (619) 441-1988
Effective as of 01-SEP-14



SOMERSET SUBACUTE AND CARE

 151 CLAYDELLE AVE
EL CAJON, CA 92020
 (619) 442-0245
Effective as of 01-NOV-19



VICTORIA POST ACUTE CARE

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-NOV-19



VICTORIA SPECIAL CARE CTR

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR

 622 S ANZA ST
EL CAJON, CA 92020
 (619) 442-0544
Effective as of 01-OCT-11



AVIARA HEALTHCARE CENTER

 944 REGAL RD
ENCINITAS, CA 92024
 (760) 944-0331
Effective as of 01-OCT-11



ENCINITAS NURSING AND

C3. 專業護理機構 (SNF)



REHAB CTR

 900 SANTA FE DR
ENCINITAS, CA 92024
 (760) 753-6423
Effective as of 01-DEC-12



ESCONDIDO CARE CENTER

 421 E MISSION AVE
ESCONDIDO, CA 92025
 (760) 747-0430
Effective as of 01-MAY-13



LIFE CARE CENTER OF ESCONDIDO

 1980 FELICITA RD
ESCONDIDO, CA 92025
 (760) 741-6109
Effective as of 01-JAN-12



PALOMAR HEIGHTS CARE CTR

 1260 E OHIO AVE
ESCONDIDO, CA 92027
 (760) 746-1100
Effective as of 01-JAN-12



PALOMAR VISTA HEALTHCARE CTR

 201 N FIG ST
ESCONDIDO, CA 92025
 (760) 746-0303
Effective as of 01-NOV-11



REDWOOD TERRACE

 710 W 13TH AVE
ESCONDIDO, CA 92025
 (760) 291-2736
Effective as of 01-NOV-17



VALLE VISTA POST ACUTE

 1025 W 2ND AVE
ESCONDIDO, CA 92025
 (760) 745-1842
Effective as of 01-DEC-12



FALLBROOK SKILLED NURSING

 325 POTTER ST
FALLBROOK, CA 92028
 (760) 728-2330
Effective as of 01-FEB-20

DEVONSHIRE CARE CENTER



 1350 E DEVONSHIRE AVE
HEMET, CA 92544
 (951) 925-2571
Effective as of 01-JAN-12

HEMET GLOBAL MEDICAL CENTER



 1117 E DEVONSHIRE AVE
HEMET, CA 92543
 (951) 652-2811
Effective as of 01-JAN-20

MANORCARE HEALTH



SERVICES HEMET

 1717 W STETSON AVE
HEMET, CA 92545
 (951) 925-9171
Effective as of 01-JAN-12



RAMONA REHAB AND POST ACUTE CTR

 485 W JOHNSTON AVE
HEMET, CA 92543
 (951) 652-0011
Effective as of 15-APR-19

SAN JACINTO HEALTHCARE



 275 N SAN JACINTO ST
HEMET, CA 92543
 (951) 658-9441
Effective as of 01-MAR-13

THE VILLAGE HEALTHCARE CENTER



 2400 W ACACIA AVE
HEMET, CA 92545
 (951) 766-5116
Effective as of 01-JAN-12

LA JOLLA NURSING AND



REHAB CTR

 2552 TORREY PINES RD
LA JOLLA, CA 92037
 (858) 453-5810
Effective as of 01-DEC-12



THE COVE AT LA JOLLA

 7160 FAY AVE
LA JOLLA, CA 92037
 (858) 459-4361
Effective as of 01-NOV-19



ARBOR HILLS NURSING CENTER

 7800 PARKWAY DR
LA MESA, CA 91942
 (619) 460-2330
Effective as of 01-DEC-20



COMMUNITY CARE CENTER

 8665 LA MESA BLVD
LA MESA, CA 91942
 (619) 465-0702
Effective as of 01-APR-16



COUNTRY MANOR LA MESA HEALTHCARE CENTER

 5696 LAKE MURRAY BLVD
LA MESA, CA 91942
 (619) 460-7871
Effective as of 01-AUG-14

GROSSMONT POST ACUTE CARE

 8787 CENTER DR
LA MESA, CA 91942
 (619) 460-4444
Effective as of 01-NOV-19

LA MESA HEALTHCARE CTR

 3780 MASSACHUSETTS
AVE
LA MESA, CA 91941
 (619) 465-1313
Effective as of 01-OCT-11

C3. 專業護理機構 (SNF)

PARKWAY HILLS NURSING & REHAB

7760 PARKWAY DR
LA MESA, CA 91942
(619) 469-0124
Effective as of 01-APR-20

LAGUNA HILLS HEALTH AND REHAB CTR

24452 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
(949) 837-8000
Effective as of 01-APR-18

PALM TERRACE HLTHCARE AND REHAB CTR

24962 CALLE ARAGON
LAGUNA WOODS, CA 92637
(949) 587-9000
Effective as of 01-NOV-11

FREEDOM VILLAGE HEALTHCARE CTR

23442 EL TORO RD
LAKE FOREST, CA 92630
(949) 472-8353
Effective as of 01-JAN-12

LAKE FOREST NURSING CENTER

25652 OLD TRABUCO RD
LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-JAN-12

BELLA VISTA HEALTH CENTER

7922 PALM ST
LEMON GROVE, CA 91945
(619) 644-1000
Effective as of 01-SEP-13

LEMON GROVE CARE AND REHAB CTR

8351 BROADWAY

LEMON GROVE, CA 91945
(619) 463-0294
Effective as of 01-NOV-11

MURRIETA HEALTH AND REHABILITATION CENTER

24100 MONROE AVE
MURRIETA, CA 92562
(951) 600-4640
Effective as of 01-JAN-12

CASTLE MANOR NURSING AND REHABILITATION CTR

541 S V AVE
NATIONAL CITY, CA 91950
(619) 791-7900
Effective as of 01-DEC-20

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

902 EUCLID AVE
NATIONAL CITY, CA 91950
(619) 791-7700
Effective as of 01-DEC-20

PARADISE VALLEY HEALTH CARE CENTER

2575 E 8TH ST
NATIONAL CITY, CA 91950
(619) 470-6700
Effective as of 01-OCT-20

WINDSOR GARDENS CONV CTR OF SAN DIEGO

220 E 24TH ST
NATIONAL CITY, CA 91950
(619) 474-6741
Effective as of 01-JAN-12

LA PALOMA HEALTHCARE CTR

3232 THUNDER DR
OCEANSIDE, CA 92056
(760) 724-2193
Effective as of 01-OCT-11

BOULDER CREEK POST ACUTE

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-APR-20

POWAY HEALTHCARE CENTER

15632 POMERADO RD
POWAY, CA 92064
(858) 485-5153
Effective as of 01-OCT-11

THE VILLAS AT POWAY

15615 POMERADO RD
POWAY, CA 92064
(858) 613-4545
Effective as of 01-JAN-12

VILLA MONTE VISTA

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-JAN-12

ARROYO VISTA NURSING CTR

3022 45TH ST
SAN DIEGO, CA 92105
(619) 283-5855
Effective as of 01-NOV-11

BRIGHTON PLACE SAN DIEGO

1350 EUCLID AVE
SAN DIEGO, CA 92105
(619) 263-2166
Effective as of 01-JAN-12

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

11895 AVENUE OF INDUSTRY
SAN DIEGO, CA 92128
(858) 673-0101
Effective as of 01-NOV-11

C3. 專業護理機構 (SNF)

**CLAIREMONT HEALTHCARE
AND WELLNESS CENTER LLC**

8060 FROST ST
SAN DIEGO, CA 92123
(858) 278-4750
Effective as of 01-NOV-17

GOLDEN HILL POST ACUTE

1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-MAY-23

**HILLCREST HEIGHTS
HEALTHCARE CENTER**

4033 6TH AVE
SAN DIEGO, CA 92103
(619) 297-4086
Effective as of 01-MAY-24

**JACOB HEALTH CARE CENTER
LLC**

4075 54TH ST
SAN DIEGO, CA 92105
(619) 582-5168
Effective as of 01-APR-16

**KEARNY MESA
CONVALESCENT AND
NURSING HOME**

7675 FAMILY CIR
SAN DIEGO, CA 92111
(858) 278-8121
Effective as of 01-DEC-20

**MISSION HILLS POST ACUTE
CARE**

3680 REYNARD WAY
SAN DIEGO, CA 92103
(619) 297-4484
Effective as of 01-NOV-19

**POINT LOMA CONVALESCENT
HSP**

3232 DUKE ST

SAN DIEGO, CA 92110
(619) 224-4141
Effective as of 01-JAN-12

REO VISTA HEALTHCARE CTR

6061 BANBURY ST
SAN DIEGO, CA 92139
(619) 475-2211
Effective as of 01-OCT-11

**ST PAULS HEALTH CARE
CENTER**

235 NUTMEG ST
SAN DIEGO, CA 92103
(619) 677-3895
Effective as of 01-JAN-18

THE SHORES POST ACUTE

2828 MEADOW LARK DR
SAN DIEGO, CA 92123
(858) 277-6460
Effective as of 01-OCT-13

**THE SPRINGS AT PACIFIC
REGENT**

3884 NOBEL DR
SAN DIEGO, CA 92122
(858) 625-8700
Effective as of 01-NOV-11

TORREY PINES SENIOR LIVING

13101 HARTFIELD AVE
SAN DIEGO, CA 92130
(858) 259-2222
Effective as of 01-JUN-16

UNIVERSITY CARE CENTER

5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
(619) 583-1993
Effective as of 01-OCT-11

**VILLA RANCHO BERNARDO
CARE CENTER**

15720 BERNARDO CENTER
DR

SAN DIEGO, CA 92127
(858) 672-3900
Effective as of 01-JAN-12

**WINDSOR GARDENS CONV
AND REHAB OF GOLDEN HILL**

1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-JAN-12

**BROOKDALE SAN JUAN
CAPISTRANO**

31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675
(949) 248-8855
Effective as of 01-JUN-16

**STANFORD COURT SKILLED
NURSING AND REHAB
CENTER**

8778 CUYAMACA ST
SANTEE, CA 92071
(619) 449-5555
Effective as of 01-DEC-20

BRIGHTON PLACE EAST

8625 LAMAR ST
SPRING VALLEY, CA 91977
(619) 461-3222
Effective as of 01-JAN-12

**BRIGHTON PLACE SPRING
VALLEY**

9009 CAMPO RD
SPRING VALLEY, CA 91977
(619) 460-2711
Effective as of 01-JAN-12

**SUN CITY CONVALESCENT
CENTER**


27600 ENCANTO DR
SUN CITY, CA 92586
(951) 679-6858

C3. 專業護理機構 (SNF)

Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER


 44280 CAMPANULA WAY
TEMECULA, CA 92592

 (951) 466-0200

Effective as of 02-MAR-22

LA FUENTE POST ACUTE


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-DEC-21

LIFE CARE CENTER OF VISTA


 304 N MELROSE DR
VISTA, CA 92083

 (760) 724-8222

Effective as of 01-JAN-12

RANCHO VISTA


 760 E BOBIER DR
VISTA, CA 92084

 (760) 941-1480

Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-OCT-13

VISTA KNOLL SPECIALIZED CARE FACILITY

 2000 WESTWOOD RD
VISTA, CA 92083

 (760) 630-2273

Effective as of 01-NOV-11


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-445-6200

 After Hours Phone:
619-445-6200

License Number: 20A17296

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95005999

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

License Number: C172036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH ALPINE


FAMILY MEDICINE

 Website: www.mtnhealth.org


SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103

 Phone: 619-662-4100

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

License Number: DC28335

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH ALPINE

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347

 After Hours Phone: (619) 662-4100

License Number: 090000681

NPI: 1770124315


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Language(s) Spoken: Arabic, Norwegian, Spanish, Swedish

Cultural Competency: N

 Hours: M-F 8:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.mtnhealth.org

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone: 760-736-6767

License Number: A49273


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone: 760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone: 760-736-6767

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone: 760-736-6767

License Number: G74757

NPI: 1598122871


Accepting New Patients: Yes


Site English Spoken: Yes


CARLSBAD

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone: 760-736-6767


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): N

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: TRUECARE

 *Website: N/A*

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950

 *Phone: 760-736-6767*

Fax: 760-720-7204

 *After Hours Phone: 760-736-6767*

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: TRUECARE

 *Website: N/A*


TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950

 *Phone: 760-736-6767*

Fax: 760-720-7204

 *After Hours Phone: 760-736-6767*

License Number: 80000630

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Cultural Competency: N

N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: TRUECARE

 *Website: N/A*


TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950

 *Phone: 760-736-6767*

Fax: 760-720-7204

 *After Hours Phone: 760-736-6767*

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: TRUECARE

 *Website: N/A*

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

Fax: (760) 720-7204

 *After Hours Phone: (760) 736-6767*

License Number: 080000630

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y


 *Hours: M-F*

8:00AM-5:00PM

SA 8:00AM-2:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: N/A*


CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA 91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 *Website: www.fhcsd.org*





CHULA VISTA FAMILY HLTH CTR





Provider ID: 206355






 251 LANDIS AVE

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
Fax: 619-397-1161
 After Hours Phone:
619-515-2500
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 252 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR



 Website: www.fhcsd.org
**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PT294245
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org
**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: PT295173
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95001705
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95001492

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: NP95001964

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: PT291706

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone: 619-515-2500

License Number: PT292823

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish


Cultural Competency: No

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

American Sign Language (ASL): NPI: 1598122871

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*


 *After Hours Phone:
619-515-2500*

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Language(s) Spoken:
Spanish*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: 20A11087

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:*

619-662-4100

License Number: 20A13225

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN


YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: 20A14025

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN

YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A19485
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A9060
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE

CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A114600
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A114893
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A115598
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A120672

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A121861

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A123263

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A123492

NPI: 1598122871

Accepting New Patients: Yes



Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: A123604

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone:
619-515-2500*

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 *Website: www.fhcsd.org*

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone:
619-515-2500*

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 *Website: www.fhcsd.org*







CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355








 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR



Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR








Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR



Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A119689
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628



 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A153344


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628



 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628



 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628



 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A177698

NPI: 1134155377

Accepting New Patients: Yes



 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500


 After Hours Phone:
619-515-2500

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500


 After Hours Phone:
619-515-2500

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500


 After Hours Phone:
619-515-2500

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes


 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500


 After Hours Phone:
619-515-2500

License Number: A73172

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500


 After Hours Phone:
619-515-2500

License Number: A78355

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: DC26269

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA
91910-2628

Phone: 619-515-2500

After Hours Phone:
619-515-2500

License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

Website: www.fhcsd.org







CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355








251 LANDIS AVE
CHULA VISTA, CA
91910-2628

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP10943
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org






CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP23687
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138474
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA





Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138534
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A159831
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A162816
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A164392

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A177922

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A41486

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A50477

NPI: 1598122871
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A66903

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A69264

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A80185
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE

CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A87650
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A93785
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C55563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC31963
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DC20760

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DC33295

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DDS102880

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: G57243

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes



Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: G74728

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: G80234

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: NP95015413

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: PA54404

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: SP18192


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

Fax: 619-425-1184

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49591

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA PEDIATRICS

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA PEDIATRICS

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA PEDIATRICS

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034


 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

Fax: 619-662-4196

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 After Hours Phone:
619-662-4100
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA PEDIATRICS


 Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

 After Hours Phone:
619-515-2325


License Number: A144995

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA

91911-1208

 Phone: 619-515-2325

 After Hours Phone:
619-515-2325

License Number: PA19306

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

Fax: 619-420-0660

 After Hours Phone:
619-515-2325

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN


DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA
91911-1208

 Phone: 619-515-2325

Fax: 619-420-0660

 After Hours Phone:
619-515-2325


License Number: 550002305

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC


 Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-205-1360

 After Hours Phone:
619-205-1360


License Number: A95959

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-205-1376

 After Hours Phone:
619-205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A123170

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org


OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC


 Website: www.ihpsocal.org

FAMILY HLTH CTR SAN


DIEGO-RICE FAM HC

Provider ID: 417641

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325


Fax: (619) 420-0660


 After Hours Phone: (619)
515-2325

License Number: 550002305

NPI: 1083959464

Accepting New Patients: Yes


Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org


CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

Fax: (619) 662-4196


 After Hours Phone: (619)
662-4100

NPI: 1326486861

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941



 After Hours Phone: (619)
662-4100

NPI: 1326486861








Accepting New Patients: Yes
Min/Max Age: 0\150

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所





 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Y
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza



CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161
 After Hours Phone: (619) 515-2500
NPI: 1346480837
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG






EL CAJON

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0348
 After Hours Phone: 619-312-0348
License Number: G45632
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC



Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone: 619-312-0347
License Number: A68184
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org





LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone: 619-312-0347
License Number: PA58466
NPI: 1609849074
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone: 619-312-0347
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

LA MAESTRA FAMILY CLINIC INC



Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 *Phone: 619-312-0347*
 *After Hours Phone: 619-312-0347*

License Number: 20A6433
NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 20A10964
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 550002514
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: A101773
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*




SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910






 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 *Phone: 619-662-4100*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單






D1. 具備聯邦資質的健康診所

 After Hours Phone:
619-662-4100
License Number: A101888
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A





SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A120584
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON






Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A127706
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON




Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A131365
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON



Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A134995
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A40473
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A79338

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish, Tagalog
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A96002

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 *Website: N/A*





SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910






 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G43179
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON





Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95009329
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A


SAN YSIDRO HEALTH EL

CAJON






Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95012943
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON





Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT40025
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN

YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910
 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT42665
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON
 Website: N/A

LA MAESTRA CHC EL CAJON BROADWAY




Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org




LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991



License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org




LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org




LA MAESTRA CHC EL CAJON BROADWAY




Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: A160760
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org


LA MAESTRA CHC EL CAJON BROADWAY



Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: G50634
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: PA21625
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: PA58466
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org
g

LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
Fax: 619-795-5992

 After Hours Phone:
619-795-5991

NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org
g

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
Fax: 619-795-5992

 After Hours Phone:
619-795-5991

License Number: 550003567
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org
g

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: A163464
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: 20A13700
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes




Site English Spoken: Yes
 Site Languages(s) Spoken:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所



Spanish
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC




Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone: 619-515-2499
License Number: A138887
NPI: 1134155377



Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N




N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:

619-515-2499
License Number: A170055
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone: 619-515-2499
License Number: DC33150
NPI: 1134155377





Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org




CHASE AVENUE FAMILY

HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone: 619-515-2499
License Number: NP95007253
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
Fax: 619-593-7164
 After Hours Phone: 619-515-2499

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish


Cultural Competency: No
American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A7241

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A107093

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-EL CAJON


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A127798

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A134303

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A144974


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A147976

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A152462

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498



License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 *Phone: 619-515-2498*

 *After Hours Phone:*
619-515-2498

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 *Phone: 619-515-2498*

 *After Hours Phone:*
619-515-2498

License Number: A68463


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 *Phone: 619-515-2498*

 *After Hours Phone:*
619-515-2498

License Number: A72005


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 *Phone: 619-515-2498*

 *After Hours Phone:*
619-515-2498

License Number: A83390


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007


 *Phone: 619-515-2498*

 *After Hours Phone:*
619-515-2498

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: DC33869

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: NM1721

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: PA20396


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: PT292482

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 *Phone: 619-515-2498*

 *After Hours Phone: 619-515-2498*

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *Website: www.fhcsd.org*






FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340







 525 E MAIN ST
EL CAJON, CA 92020-4007

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Phone: 619-515-2498
Fax: 619-269-0191
 After Hours Phone:
619-515-2498
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org






FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
Fax: 619-269-0191
 After Hours Phone:
619-515-2498
License Number: 20A19473
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN







DIEGO-EL CAJON
Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
Fax: 619-269-0191
 After Hours Phone:
619-515-2498
License Number: 550003553
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON







Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: RN428876
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404
License Number: A151547
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-401-0404
 After Hours Phone:
619-401-0404
License Number: A158569
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CENTRO
MEDICO EL CAJON
 Website: N/A

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-401-0404

After Hours Phone:
619-401-0404

License Number: A98486

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-401-0404

After Hours Phone:
619-401-0404

License Number: G52812

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-401-0404

After Hours Phone:
619-401-0404

License Number: NP95001710

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-873-8940

After Hours Phone:
619-873-8940

License Number: A114674

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

133 W MAIN ST STE 100
EL CAJON, CA 92020-3325

Phone: 619-873-8940

After Hours Phone:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

619-873-8940
License Number: DPM1536
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-873-8940
 After Hours Phone:
619-873-8940
License Number: PA16673
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-873-8940
Fax: 619-401-0522
 After Hours Phone:
619-873-8940

NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971
 133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
 Phone: 619-873-8940
Fax: 619-401-0522
 After Hours Phone:
619-873-8940
License Number: 550000430
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
 Website: N/A

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-269-1262
 After Hours Phone:
619-269-1262
License Number: C55979

NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
Fax: (619) 269-0191

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

☎ After Hours Phone: (619) 515-2498

License Number: 550003553

NPI: 1932561198

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

☎ Phone: (619) 873-8940

Fax: (619) 401-0522

☎ After Hours Phone: (619) 873-8940

License Number: 550000430

NPI: 1154480069

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y
Cultural Competency: Y

🕒 Hours: SU-SA
8:00AM-8:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION

🌐 Website: N/A

Email:

iselaocchoa@borregohealth.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE
EL CAJON, CA 92020

☎ Phone: (619) 515-2499

Fax: (619) 593-7164

☎ After Hours Phone: (619) 515-2499

NPI: 1104861681

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

🌐 Website: www.fhcsd.org
Email: jaquelinca@fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

📍 1032 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 795-5991

Fax: (619) 795-5992

☎ After Hours Phone: (619) 795-5991

License Number: 550003567

NPI: 1134590086

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: Y

🕒 Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

🌐 Website: www.lamaestra.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

☎ Phone: (619) 662-4100

Fax: (619) 785-3356

☎ After Hours Phone: (619) 662-4100

License Number: 550002514

NPI: 1568845741

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
☐ Site Languages(s) Spoken:
Spanish, Arabic, Farsi,
Russian, Latin

Cultural Competency: Y

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: www.syhealth.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

Fax: (619) 749-5480

After Hours Phone: (619)
312-0347

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: Y

Hours: M-TU
8:00AM-5:00PM

TH-F 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

ENCINITAS

TRUECARE

Provider ID: 480243

1130 2ND ST
ENCINITAS, CA
92024-5008

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480243

1130 2ND ST
ENCINITAS, CA
92024-5008

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: PA19437

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480243

1130 2ND ST
ENCINITAS, CA
92024-5008

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480243

1130 2ND ST
ENCINITAS, CA
92024-5008

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480243

1130 2ND ST
ENCINITAS, CA
92024-5008

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
After Hours Phone:
760-753-7842
License Number: A103940
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
After Hours Phone:
760-753-7842
License Number: A116562
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

Website: N/A
TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
Fax: 760-736-8740
After Hours Phone:
760-753-7842
License Number: 80000638
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
After Hours Phone:
760-753-7842
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA
92024-5008
Phone: 760-753-7842
Fax: 760-736-8740
After Hours Phone:
760-753-7842
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
Fax: (760) 736-8740
After Hours Phone: (760)
753-7842
License Number: 080000638
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-TH
8:00AM-5:00PM
F 8:30AM-5:30PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: IHP of Southern Cal-PHP


 Website: N/A


ESCONDIDO

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: A62467

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A


SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

Fax: 619-662-7952

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C171064

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G58033

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA
92025-4405

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 Website: N/A

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO







 Website: www.ihpsocal.org





NEIGHBORHOOD HEALTHCARE ESCONDIDO







Provider ID: 206270





D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: A109655
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: 20A14292
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE GRAND AVE**
Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000483
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE GRAND AVE**
Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 550000697
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE GRAND AVE**
Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000397
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE GRAND AVE**
Provider ID: 206269
 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604
 Phone: 760-520-8200
 After Hours Phone:
760-520-8200
License Number: PA51508
NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

After Hours Phone:
760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

After Hours Phone:

760-520-8200

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

After Hours Phone:
760-520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

After Hours Phone:
760-737-6900

License Number: 80000158

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY


 Website: N/A

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

After Hours Phone:
760-520-8200

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE

 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: NP8169

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

Fax: 360-462-2748

 After Hours Phone:
760-737-6900

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: DPM5260

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A161074

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A140398

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A145349

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 Website: N/A

**NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY**

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052

 Phone: 760-737-6900

 After Hours Phone:
760-737-6900

License Number: A120348

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


NEIGHBORHOOD


HEALTHCARE VALLEY
PARKWAY


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND
PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

Fax: 360-462-2752

 After Hours Phone:
760-520-8340

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND
PRENATAL

 Website: www.ihpsocal.org


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900

License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND

PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340


License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND
PRENATAL


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: NP4799

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A


**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747


 After Hours Phone:
760-690-5900

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: G83438

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A159727

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD
HEALTHCARE ESCONDIDO

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A78116

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A139490

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
Fax: 360-466-2745
 After Hours Phone:
760-520-8100
License Number: 80000397
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
Fax: 360-466-2745
 After Hours Phone:
760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC12036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: DC28605
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A82173

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

 Website: www.ihpsocal.org

CENTRO MEDICO ESCONDIDO

Provider ID: 419344

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606


License Number: 550001260

NPI: 1023349883

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: Y

 Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

 Website: N


Email:
iselaocchoa@borregohealth.org

NEIGHBORHOOD

**HEALTHCARE PEDIATRICS
AND PRENATAL**

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900
Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900


License Number: 550000511

NPI: 1437335353


Accepting New Patients: Yes

Min/Max Age: 0\21

Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: N/A

NEIGHBORHOOD

**HEALTHCARE PIDS AND
PRENATAL**

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340
Fax: (360) 462-2752


 After Hours Phone: (760)
520-8340

NPI: 1265618185

Accepting New Patients: Yes

Min/Max Age: 0\21

Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900


License Number: 080000158

NPI: 1720264641

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-TU
8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP


 Website: N/A

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100


License Number: 080000397

NPI: 1598703647


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

American Sign Language (ASL): Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH

ESCONDIDO FAMILY


MEDICINE

Provider ID: 588941

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (619) 662-7952

 After Hours Phone: (619)
662-4100

NPI: 1801438239

Accepting New Patients: Yes

Min/Max Age: 0\120

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP


 Website: N/A


ESCONDIDO FAMILY HEALTH

CENTER

Provider ID: 652372

 128 N BROADWAY
ESCONDIDO, CA 92025


 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

License Number: 550002865

NPI: 1417640491

Accepting New Patients: Yes
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: N/A

FALLBROOK

FALLBROOK FAMILY HLTH


CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA
92028-4006

 Phone: 760-451-4720


Fax: 760-451-4700

 After Hours Phone:
760-451-4720

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A


FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
FALLBROOK, CA
92028-4006
 Phone: 760-451-4720
Fax: 760-451-4700
 After Hours Phone:
760-451-4720
License Number: 80000150
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
FALLBROOK, CA
92028-4006
 Phone: 760-451-4770
 After Hours Phone:
760-451-4770
License Number: A169529

NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA
92028-2912
 Phone: 760-723-6200
 After Hours Phone:
760-723-6200
License Number: NP95003447
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No





American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER






Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200
License Number: 550004110
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
License Number: 080000002
NPI: 1851300123
Accepting New Patients: No
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: Y
 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760) 723-6200

License Number: 550003781

NPI: 1851300123

Accepting New Patients: No
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028


 Phone: (760) 723-6200


 After Hours Phone: (760) 723-6200

License Number: 550004110

NPI: 1851300123

Accepting New Patients: No
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760) 723-6200

License Number: 080000002

NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)


723-6200

License Number: 550003781

NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y


 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760) 723-6200

License Number: 550004110

NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

nityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000002
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550003781
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR
Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760) 451-4720
License Number: 080000150
NPI: 1982756086
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A
Email: a.escobedo@chsica.org

IMPERIAL BEACH


IMPERIAL BEACH HEALTH

CENTER
Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932-1503
Phone: 619-429-3733
After Hours Phone: 619-429-3733
License Number: A51447
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org




IMPERIAL BEACH HEALTH CENTER
Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932-1503
Phone: 619-429-3733
After Hours Phone: 619-429-3733
License Number: A66830
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: IMPERIAL
BEACH HEALTH CENTER
 Website: www.ihpsocal.org


IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619)
429-3733

License Number: 090000119
NPI: 1790718351

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP



 Website: www.ihpsocal.org

LA MESA




LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
 After Hours Phone:
619-464-6434



License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A




LA MESA PEDIATRICS



Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone:
619-464-6434
NPI: 1134144165

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS



Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone:

619-464-6434
License Number: 20A11733
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: 619-464-6434
Fax: 619-464-5109
 After Hours Phone:
619-464-6434

License Number: 550000430
NPI: 1134144165
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA MESA
PEDIATRICS
 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942-3135
 Phone: 619-464-6434

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Fax: 619-464-5109

☎ After Hours Phone:
619-464-6434

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

☎ Phone: 619-464-6434

Fax: 619-464-5109

☎ After Hours Phone:
619-464-6434

License Number: A89865

NPI: 1134144165

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

☎ Phone: 619-464-6434

Fax: 619-464-5109

☎ After Hours Phone:
619-464-6434

License Number: C133872

NPI: 1134144165

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

🌐 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

📍 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

☎ After Hours Phone: (619)
464-6434

License Number: 550000430

NPI: 1033759311

Accepting New Patients: Yes

Min/Max Age: 0\21

☑ Site English Spoken: Y
Cultural Competency: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION

🌐 Website: N/A

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

📍 10039 VINE ST
LAKESIDE, CA 92040-3120

☎ Phone: 858-218-3000

☎ After Hours Phone:
858-218-3000

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE

🌐 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

📍 10039 VINE ST
LAKESIDE, CA 92040-3120

☎ Phone: 858-218-3000

☎ After Hours Phone:
858-218-3000

License Number: A43914

NPI: 1598122871

Accepting New Patients: Yes

☑ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: A75411

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

Fax: 360-462-2744

 After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

Fax: 360-462-2744

 After Hours Phone:
858-218-3000


License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE LAKESIDE


 Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

Fax: (360) 462-2744

 After Hours Phone: (858)
218-3000


License Number: 080000483

NPI: 1932384120

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org

LEMON GROVE

LEMON GROVE FAMILY






HEALTH CENTER







Provider ID: 419139







 7592 BROADWAY






D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所







LEMON GROVE, CA
91945-1604
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A





**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A102060
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON

































GROVE FAMILY HEALTH
CENTER
 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A107323
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER
 Website: N/A

**LEMON GROVE FAMILY
HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- N**
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 *Phone: 619-515-2550*
 *After Hours Phone: 619-515-2550*
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 *Phone: 619-515-2550*
 *After Hours Phone: 619-515-2550*
License Number: A114181
NPI: 1134155377
- Accepting New Patients: Yes*
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 *Phone: 619-515-2550*
 *After Hours Phone: 619-515-2550*
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 *Phone: 619-515-2550*
-  *After Hours Phone: 619-515-2550*
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945-1604
 *Phone: 619-515-2550*
 *After Hours Phone: 619-515-2550*
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 *Website: N/A*
- LEMON GROVE FAMILY HEALTH CENTER**

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A68463

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: C172318

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY

LEMON GROVE, CA
91945-1604


 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 *Website: N/A*

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 *Phone: 619-515-2550*

 *After Hours Phone:
619-515-2550*

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 *Website: N/A*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: NP95001050

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON

GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: NP95009933

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: PA12416

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

Fax: 619-825-9577

After Hours Phone:
619-515-2550

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550
Fax: 619-825-9577

🕒 After Hours Phone:
619-515-2550

License Number: 550001268
NPI: 1134155377

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA

91945-1604

☎ Phone: 619-515-2550

🕒 After Hours Phone:
619-515-2550

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

🕒 After Hours Phone:
619-515-2550

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY

HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA 91945

☎ Phone: (619) 515-2550

Fax: (619) 825-9577

🕒 After Hours Phone: (619)
515-2550

License Number: 550001268

NPI: 1427282466

Accepting New Patients: Yes
Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

🌐 Website: N/A

Email: valeriade@fhcsd.org

NATIONAL CITY

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-662-4100

Fax: 619-474-3722

🕒 After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所




<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY Website: www.ihpsocal.org</p>	<p>License Number: NP95000203 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN GRANGER SCHOOL BASED Website: www.operationsamahan.org</p>	<p>Provider ID: 418302 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 Phone: 844-200-2426 Fax: 619-434-8999 After Hours Phone: 844-200-2426 License Number: 550002622 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN GRANGER SCHOOL BASED Website: www.operationsamahan.org</p>
<p>SAN YSIDRO HEALTH NATIONAL CITY Provider ID: 227412 1136 D AVE NATIONAL CITY, CA 91950-3412 Phone: 619-662-4100 Fax: 619-474-3722 After Hours Phone: 619-662-4100 License Number: G46444 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY Website: www.ihpsocal.org</p>	<p>OPERATION SAMAHAN GRANGER SCHOOL BASED Provider ID: 418302 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 Phone: 844-200-2426 Fax: 619-434-8999 After Hours Phone: 844-200-2426 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN GRANGER SCHOOL BASED Website: www.operationsamahan.org</p>	<p>OPERATION SAMAHAN - NATIONAL C Provider ID: 417102 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: A74777 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Tagalog, Lao, Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>
<p>OPERATION SAMAHAN GRANGER SCHOOL BASED Provider ID: 418302 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 Phone: 844-200-2426 After Hours Phone: 844-200-2426</p>	<p>OPERATION SAMAHAN GRANGER SCHOOL BASED Provider ID: 418302 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 Phone: 844-200-2426 Fax: 619-434-8999 After Hours Phone: 844-200-2426 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN GRANGER SCHOOL BASED Website: www.operationsamahan.org</p>	<p>OPERATION SAMAHAN - NATIONAL C Provider ID: 417102 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 Phone: 844-200-2426 After Hours Phone: 844-200-2426 License Number: A74777 NPI: 1801907449 Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Tagalog, Lao, Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
 Website: www.operationsamahan.org




OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP22974
NPI: 1801907449

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
 Website: www.operationsamahan.org


OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426




License Number: NP95000203
NPI: 1801907449

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C


Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
Fax: 619-474-3919
 After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
 Phone: 844-200-2426
Fax: 619-474-3919
 After Hours Phone:
844-200-2426
License Number: 90000183
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
 Website: www.operationsamahan.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 Phone: 619-280-4213
 After Hours Phone:
619-280-4213
License Number: A167184
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

American Sign Language (ASL): License Number: NP95009891
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

Fax: 619-434-7310

 After Hours Phone:
619-434-7308

License Number: NP95013257

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-564-8765

 After Hours Phone:
619-564-8765

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA

91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

 Phone: 619-434-7308

 After Hours Phone:
619-434-7308


License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-434-7308

After Hours Phone:
619-434-7308

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: 619-798-3977

After Hours Phone:
619-798-3977

License Number: A41375

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SOUTH BAY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

330 E 8TH ST
NATIONAL CITY, CA
91950-2312

Phone: 619-662-4100

Fax: 619-259-2807

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

































Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):




D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</i></p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>619-515-2399</i></p> <p><i>License Number: NP95010663</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</i></p> <p> <i>Website: www.fhcsd.org</i></p>
<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: 20A18460</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</i></p> <p> <i>Website: www.fhcsd.org</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: A176878</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</i></p> <p> <i>Website: www.fhcsd.org</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: PA55660</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY</i></p> <p> <i>Website: www.fhcsd.org</i></p>
<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone: 619-515-2399</i></p> <p><i>License Number: A163862</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p> <p> 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856</p> <p> <i>Phone: 619-515-2399</i></p> <p> <i>After Hours Phone:</i></p>	<p>FAMILY HEALTH CTR SD NATIONAL CITY</p> <p><i>Provider ID: 418930</i></p>


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
 Phone: 619-515-2399
Fax: 619-269-0053
 After Hours Phone:
619-515-2399
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY


 Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: 619-515-2399
Fax: 619-269-0053

 After Hours Phone:
619-515-2399

License Number: 550000465
NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SD NATIONAL
CITY

 Website: www.fhcsd.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A118227
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A146819
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS




Provider ID: 227418






 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956






 Phone: 619-662-4100




D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所






 After Hours Phone:
619-662-4100
License Number: A157488
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org



**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A167529
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G88347
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
Fax: 619-259-2806
 After Hours Phone:
619-662-4100
License Number: 20A11518
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100
Fax: 619-259-2807
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
PARADISE HILLS**
Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Fax: 619-259-2807

☎ After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956

☎ Phone: 619-662-4100

Fax: 619-259-2807

☎ After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE

HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-336-2300

☎ After Hours Phone:
619-336-2300

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-428-4463

☎ After Hours Phone:
619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1598122871

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA 91950-3412

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A165184


NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1598122871

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA 91950-3412

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100
License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA 91950-3412

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone: 619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA 91950-3412

 Phone: 619-662-4100

Fax: 619-336-2323

 After Hours Phone: 619-662-4100

License Number: A112571

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807


 After Hours Phone: (619) 662-4100


NPI: 1598907487

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: syhealth.org/clinic/s/paradise-hills-family-clinic

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619) 515-2399
License Number: 550000465
NPI: 1417409228
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308

Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N
Hours: TH 8:00AM-2:00PM
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514

After Hours Phone: (619) 662-4100
NPI: 1851757215

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Y

Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.syhealth.org
Email: dinah.pierce@syhealth.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
License Number: 090000183
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Lao, Spanish
Cultural Competency: Y

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 434-8999

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

☎ After Hours Phone: (844) 200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

🌐 Website: www.operationsamahan.org

SAN YSIDRO HEALTH

NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

Fax: (619) 474-3722

☎ After Hours Phone: (619) 662-4100

NPI: 1003869363

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: Y

🕒 Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

🌐 Website: syhealth.org/clinics/national-city-family-clinic-1

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

🌐 Website: www.ihpsocal.org

OCEANSIDE

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ Phone: 760-736-6767

☎ After Hours Phone: 760-736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ Phone: 760-736-6767

☎ After Hours Phone: 760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

🌐 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ Phone: 760-736-6767

☎ After Hours Phone: 760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken: Spanish

TRUECARE

Provider ID: 296476

📍 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

☎ Phone: 760-736-6767

☎ After Hours Phone: 760-736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org	Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org	NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org
TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 After Hours Phone: 760-757-4566 License Number: 20A15689 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org	TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 After Hours Phone: 760-757-4566 License Number: PA22667 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org	TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 Fax: 760-736-8740 After Hours Phone: 760-757-4566 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: www.ihpsocal.org
TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 After Hours Phone: 760-757-4566 License Number: C152937 NPI: 1598122871	TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 After Hours Phone: 760-757-4566 License Number: PA53036	TRUECARE Provider ID: 296476 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 Phone: 760-757-4566 Fax: 760-736-8740

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *After Hours Phone:*
760-757-4566

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 *Phone:* 760-757-4566

Fax: 760-757-3004

 *After Hours Phone:*
760-757-4566

License Number: A66289

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296478

 605 CROUCH ST BLDG C

OCEANSIDE, CA

92054-4415

 *Phone:* 760-757-4566

 *After Hours Phone:*
760-757-4566

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 *Website:* www.ihpsocal.org

TRUECARE

Provider ID: 296479

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 *Phone:* 760-757-4566

 *After Hours Phone:*
760-757-4566

License Number: A64435

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 *Website:* www.ihpsocal.org


TRUECARE

Provider ID: 296477

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 *Phone:* 760-757-4566

Fax: 760-757-3004

 *After Hours Phone:*
760-757-4566

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 *Website:* www.ihpsocal.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 *Phone:* 760-631-5000

 *After Hours Phone:*
760-631-5000

License Number: 20A8949

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC

 *Website:* www.vistacommunityclinic.org




D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: A149340

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA
92057-6043
 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000


License Number: NP95003571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043
 Phone: 760-631-5000
Fax: 760-414-3731
 After Hours Phone:
760-631-5000

License Number: A130883

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-433-3155
Fax: 760-736-8740

 After Hours Phone:
760-433-3155

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Medical Group/IPA: TRUECARE

 Website: N/A


TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-433-3155

Fax: 760-736-8740


 After Hours Phone:
760-433-3155

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-433-3155

 After Hours Phone:
760-433-3155


License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-433-3155

 After Hours Phone:
760-433-3155

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-891-4667

 After Hours Phone:
760-891-4667


License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480315

 3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommu
nityclinic.org


VISTA COMMUNITY CLINIC


PIER VIEW WAY

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000745

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC HORNE STREET

 Website: N/A

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: 20A17371

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95006826
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET


 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: NP95007885

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET

🌐 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

📍 517 N HORNE ST
OCEANSIDE, CA
92054-2518

☎ Phone: 760-631-5000

Fax: 760-414-3892

🕒 After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET

🌐 Website: N/A

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

📍 818 PIER VIEW WAY

OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y

Cultural Competency: Y

🕒 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

License Number: 080000510

NPI: 1629357355

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y

Cultural Competency: Y

🕒 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

TRUECARE

Provider ID: 480247

📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054

☎ Phone: (760) 757-5841

Fax: (760) 736-8740

🕒 After Hours Phone: (760)
757-5841

License Number: 080000637

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: N/A

TRUECARE

Provider ID: 480247

📍 2210 MESA DR STE 300

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

OCEANSIDE, CA 92054
☎ Phone: (760) 757-5841
Fax: (760) 736-8740
🕒 After Hours Phone: (760) 757-5841
License Number: 080000531
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
🗉 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
📍 517 N HORNE ST
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\999
🗉 Site English Spoken: Y
Cultural Competency: Y
🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
📍 517 N HORNE ST
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\999
🗉 Site English Spoken: Y
Cultural Competency: Y
🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000
License Number: 550003781
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\999
🗉 Site English Spoken: Y
Cultural Competency: Y
🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
License Number: 550004110
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\999
🗉 Site English Spoken: Y
Cultural Competency: Y
🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 550004110

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 080000002

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 550003781

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


License Number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


License Number: 550004110

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999


 Site English Spoken: Y
Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM




American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*
License Number: 080000002
NPI: 1851300123

Accepting New Patients: Yes
Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: Y

 *Hours: M-F*
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):




N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*


License Number: 550003781

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: Y

 *Hours: M-F*
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: www.vistacommunityclinic.org*

PAUMA VALLEY

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: 760-742-9919*

 *After Hours Phone:*
760-742-9919

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY

 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: 760-742-9919*

 *After Hours Phone:*
760-742-9919

License Number: G61829


NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY


 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 *Phone: 760-742-9919*

Fax: 858-633-4696

 *After Hours Phone:*
760-742-9919

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

 Phone: 760-742-9919

Fax: 858-633-4696

 After Hours Phone:
760-742-9919

License Number: 80000611

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE PAUMA VALLEY

 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061

 Phone: (760) 742-9919

Fax: (858) 633-4696

 After Hours Phone: (760)
742-9919

License Number: 080000611


NPI: 1407031693

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

 Website: www.ihpsocal.org


POWAY

NEIGHBORHOOD HEALTHCARE GOLD FAMILY


HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

Fax: 360-462-2742

 After Hours Phone:
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER


 Website: N/A


NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: A119661

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER


 Website: N/A


NEIGHBORHOOD HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: PA23310

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER


 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000


License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GOLD FAMILY
HEALTH CENTER

 Website: N/A


NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064-4520


 Phone: 858-218-3000

Fax: 360-462-2742

 After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GOLD FAMILY
HEALTH CENTER

 Website: N/A

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000


License Number: 550004321

NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: N/A

Provider ID: 449438

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767


License Number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.ihpsocal.org


SAN DIEGO

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: NP16433

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: yes
 Site Languages(s) Spoken:

Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

RAMONA

TRUECARE

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN DIEGO FAMILY CARE</i></p> <p> <i>Website: www.sdfamilycare.org</i></p> <p>SAN DIEGO FAMILY CARE</p> <p><i>Provider ID: 482070</i></p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> <i>Phone: 858-810-8700</i></p> <p> <i>After Hours Phone: 858-810-8700</i></p> <p><i>License Number: NP23847</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: yes</i></p> <p><input type="checkbox"/> <i>Site Language(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN DIEGO FAMILY CARE</i></p> <p> <i>Website: www.sdfamilycare.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST</p> <p><i>Provider ID: 417937</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103-2143</p> <p> <i>Phone: 619-515-2400</i></p> <p> <i>After Hours Phone: 619-515-2400</i></p> <p><i>License Number: 20A17836</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST</p> <p><i>Provider ID: 417937</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103-2143</p> <p> <i>Phone: 619-515-2545</i></p> <p> <i>After Hours Phone: 619-515-2545</i></p> <p><i>License Number: 20A12504</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST</p> <p><i>Provider ID: 417937</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103-2143</p> <p> <i>Phone: 619-515-2545</i></p> <p> <i>After Hours Phone: 619-515-2545</i></p> <p><i>License Number: 20A11612</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST</p> <p><i>Provider ID: 417937</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103-2143</p> <p> <i>Phone: 619-515-2545</i></p> <p> <i>After Hours Phone: 619-515-2545</i></p> <p><i>License Number: 20A14794</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST</p> <p><i>Provider ID: 417937</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103-2143</p> <p> <i>Phone: 619-515-2545</i></p> <p> <i>After Hours Phone: 619-515-2545</i></p> <p><i>License Number: 20A15413</i></p> <p><i>NPI: 1134155377</i></p>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A17702

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A19399

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: 20A17657


NPI: 1134155377

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: 20A17926


NPI: 1134155377

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A100333

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A109633

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

Fax: 858-488-1394

 After Hours Phone:
619-515-2444

License Number: 80000115

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:
619-515-2545


License Number: A119631


NPI: 1134155377

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: A140324


NPI: 1134155377

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: A144372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

 After Hours Phone:
858-279-0925

License Number: G44807

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:
858-279-0925

License Number: A93812

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-279-0377

 After Hours Phone:
858-279-0925

License Number: G70886

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-633-4680

 After Hours Phone:
858-279-0925

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: 20A12402

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A137415

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A92173

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes





































Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p> Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p> Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: G70886 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>
<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: A94449 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: G41532 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: yes  Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO FAMILY CARE  Website: www.sdfamilycare.org</p>	<p>FAMILY HLTH CTR SAN DIEGO-BEACH AREA Provider ID: 402851  3705 MISSION BLVD SAN DIEGO, CA 92109-7104  Phone: 619-515-2300  After Hours Phone: 619-515-2300 License Number: A162946 NPI: 1134155377 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA  Website: www.fhcsd.org</p>
<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307  Phone: 858-810-8700  After Hours Phone: 858-810-8700 License Number: C174985 NPI: 1598122871 Accepting New Patients: Yes</p>	<p>SAN DIEGO FAMILY CARE Provider ID: 482070  7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p>	


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A113001

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):




N


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A116680
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A118095
NPI: 1134155377


Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A148014
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A154298
NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A154399
NPI: 1134155377




Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A163464

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A164859

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: C53623


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: DC20729

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH


AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: NM1662

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

Fax: 858-488-1394

 After Hours Phone:
619-515-2444


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

Fax: 858-536-8034

 After Hours Phone:
844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes


Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN - MIRA MESA

 Website: www.operationsamahan.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

Fax: 858-536-8034

 After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes


Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN - MIRA MESA


 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: C54941

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes
 Site Languages(s) Spoken:

Spanish, Tagalog


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA MESA




 Website: www.operationsamahan.org



OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101




D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: DC15775
NPI: 1801907449

Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org




OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP95003211
NPI: 1801907449


Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org




OPERATION SAMAHAN - MIRA MESA



Provider ID: 417101
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
Fax: 858-578-4417
 After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375
 Phone: 844-200-2426
Fax: 858-578-4417
 After Hours Phone:

844-200-2426
License Number: 80000146
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: A71544
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - MIRA
MESA
 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes
Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: NP22031

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER

Website: www.ibclinic.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

Fax: 619-628-5550

After Hours Phone:
619-429-3733

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER

Website: www.ibclinic.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS




Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889






Phone: 844-200-2426

D. Blue Shield Promise Medi-Cal 網絡內提供者清單




D1. 具備聯邦資質的健康診所

 After Hours Phone:
844-200-2426
License Number: DC29074
NPI: 1801907449
Accepting New Patients: Yes
 Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
RANCHO PENASQUITOS
 Website: www.operationsamahan.org


NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
 1016 OUTER RD
SAN DIEGO, CA 92154-1351
 Phone: 619-429-3733
Fax: 619-628-5550
 After Hours Phone:
619-429-3733
License Number: 550001474
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER
 Website: www.ibclinic.org




OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP22974
NPI: 1801907449
Accepting New Patients: Yes

Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
RANCHO PENASQUITOS
 Website: www.operationsamahan.org




OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: NP95003211
NPI: 1801907449
Accepting New Patients: Yes



Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
RANCHO PENASQUITOS
 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: PA19664
NPI: 1801907449
Accepting New Patients: Yes

Site English Spoken: yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
RANCHO PENASQUITOS
 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92129-2889
☎ Phone: 844-200-2426
Fax: 858-695-9074
🕒 After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
RANCHO PENASQUITOS

🌐 Website: www.operationsa
mahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

📍 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

☎ Phone: 844-200-2426
Fax: 858-695-9074

🕒 After Hours Phone:
844-200-2426

License Number: 550002478
NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
RANCHO PENASQUITOS

🌐 Website: www.operationsa
mahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

📍 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

☎ Phone: 844-200-2426
Fax: 858-695-9074

🕒 After Hours Phone:
844-200-2426

License Number: 550003857
NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN
RANCHO PENASQUITOS

🌐 Website: www.operationsa
mahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375

☎ Phone: 844-200-2426

🕒 After Hours Phone:
844-200-2426

License Number: A161105

NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

🌐 Website: www.operationsa
mahan.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

📍 1016 OUTER RD
SAN DIEGO, CA 92154-1351

☎ Phone: 619-429-3733

🕒 After Hours Phone:
619-429-3733

License Number: A112781

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER

🌐 Website: www.ibclinic.org

NESTOR COMMUNITY HEALTH CENTER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 214492

 1016 OUTER RD
SAN DIEGO, CA 92154-1351
 Phone: 619-429-3733
 After Hours Phone:
619-429-3733

License Number: A165398

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes
 Site Language(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER

 Website: www.ibclinic.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
619-515-2426

License Number: PA59481

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
619-515-2426

License Number: PA58098

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
619-515-2426

License Number: PA58905

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR OF


SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520

Fax: 619-231-0431

 After Hours Phone:
619-515-2520

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR OF SDELM ST


 Website: www.fhcsd.org

FAMILY HEALTH CTR OF


SDELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101-2602

 Phone: 619-515-2520

Fax: 619-231-0431

 After Hours Phone:
619-515-2520

License Number: 550002061

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR OF SDELM ST

 Website: www.fhcsd.org


FAMILY HEALTH CTR IBARRA


Provider ID: 417987

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426


License Number: 20A19345

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426


License Number: A145023

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: G149974

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:

619-515-2426

License Number: NP17838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: NP95004443

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: PA21385

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CTR IBARRA

 Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9154

 After Hours Phone:
619-255-9154

License Number: A163693

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A111170

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9154

 After Hours Phone:
619-255-9154

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A75533

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A82639

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92105-1608
 Phone: 619-255-9155
 After Hours Phone:
619-255-9155
License Number: C55979
NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: DC28966

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: G87837

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: NP95013257

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: PA13694

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: PA21625 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No</p> <p>American Sign Language (ASL):</p> <p><i>N</i></p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p>	<p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-255-9155</p> <p>Fax: 619-749-5480</p> <p> After Hours Phone: 619-255-9155</p> <p>License Number: A81682 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No</p> <p>American Sign Language (ASL):</p> <p><i>N</i></p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p>	<p><i>N</i></p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-564-8765</p> <p> After Hours Phone: 619-564-8765</p> <p>License Number: NP95009891 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes Cultural Competency: No</p> <p>American Sign Language (ASL):</p> <p><i>N</i></p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC</p> <p> Website: www.lamaestra.org</p> <p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC</p> <p>Provider ID: 185268</p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> Phone: 619-798-3947</p> <p> After Hours Phone: 619-798-3947</p> <p>License Number: DC32800 NPI: 1609849074</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 *Website: www.lamaestra.org*

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

 2630 1ST AVE
SAN DIEGO, CA 92103-6599

 *Phone: 619-234-2158*


Fax: 619-234-0206

 *After Hours Phone: 619-234-2158*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken: Korean, Spanish, Hindi*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER

 *Website: www.sdaihc.org*

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

 2630 1ST AVE
SAN DIEGO, CA 92103-6599

 *Phone: 619-234-2158*

Fax: 619-234-0206

 *After Hours Phone:*


619-234-2158

License Number: 90000168

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken: Korean, Spanish, Hindi*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER


 *Website: www.sdaihc.org*

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 *Phone: 619-515-2426*

 *After Hours Phone: 619-515-2426*

License Number: 20A17577

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A51318


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS

 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH Website: www.fhcsd.org CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH Website: www.fhcsd.org CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA21042

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS

 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone:
619-515-2424

License Number: 90000469

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14919

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A15068

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A20252

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH Website: www.fhcsd.org

CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH Website: www.fhcsd.org

CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Site English Spoken: Yes
Cultural Competency: No

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120


 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95006792

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120


 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA18746

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120


 Phone: 619-515-2424


Fax: 619-501-0627

 After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524


 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: 20A7662

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 After Hours Phone:
619-563-0250

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

 After Hours Phone:
619-563-0250

License Number: A175116

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

 After Hours Phone:
619-563-0250

License Number: G60630

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: A163512

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: MID-CITY
COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597


 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

MID-CITY COMMUNITY CLINIC

Provider ID: 233532






 4305 UNIVERSITY AVE STE
150

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所






SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A152267
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC






Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A163512
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC






Provider ID: 233532

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A61238
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org




MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A72833
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC






























Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: A94449
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: NP95019446
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: MID-CITY
COMMUNITY CLINIC
 Website: www.sdfamilycare.org


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p><i>.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A154708</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i>  <i>Website: www.fhcsd.org</i></p>	<p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A171135</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i>  <i>Website: www.fhcsd.org</i></p>	<p> <i>Website: www.fhcsd.org</i></p> <p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A180044</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i>  <i>Website: www.fhcsd.org</i></p>
<p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A169207</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p>	<p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A177462</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p>	<p>FAMILY HLTH CTR SD HILLCREST <i>Provider ID: 417937</i>  4094 4TH AVE SAN DIEGO, CA 92103-2143  <i>Phone: 619-515-2545</i>  <i>After Hours Phone: 619-515-2545</i> <i>License Number: A70175</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> <i>N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST</i></p>

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: A80153

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: C52451

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: DC33150

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: DC31024

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: G16236

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP18098

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: NP95001899

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: G80316

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP7374

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: NP95005293

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PA23231

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT28061

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PA21385

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT12930

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT292351

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT293536

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: PT296559

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: PT292613

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545


License Number: PT40975

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

 Website: www.fhcsd.org


FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:
619-515-2545

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:
619-515-2545

License Number: 550003099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:
619-515-2545

License Number: A95356

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

 Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED


 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A7502

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

 Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 550003882

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN

YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED


 *Website: N/A*

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: NP95005999

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED


 *Website: N/A*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: 20A11535

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: 20A14919

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS

 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone: 619-515-2424*

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: NORTH PARK FAMILY HEALTH

CENTERS

 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH

CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A132576

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH


PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: NORTH PARK FAMILY HEALTH


CENTERS


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY

COLLEGE

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: A76785


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

 *Website: www.fhcsd.org*


FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

Fax: 619-501-5814

 *After Hours Phone: 619-515-2525*

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

 *Website: www.fhcsd.org*






FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429







 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所







 Phone: 619-515-2525
Fax: 619-501-5814
 After Hours Phone:
619-515-2525
License Number: 550002865
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS







Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone:
619-515-2430
License Number: 20A7147
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT







CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone:
619-515-2430
License Number: PA58826
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org






DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
Fax: 619-578-2410
 After Hours Phone:
619-515-2430
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
Fax: 619-578-2410
 After Hours Phone:
619-515-2430
License Number: 550002251
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
DOWNTOWN FAMILY CTR AT
CONNECTIONS
 Website: www.fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: G72486
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: NP10769

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: PA54617

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500

License Number: A42127

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: ST


VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

**ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER**

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500


License Number: A54702


NPI: 1598122871

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500


 After Hours Phone:
619-233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500


 After Hours Phone:
619-233-8500

License Number: A67762

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500


 After Hours Phone:
619-233-8500

License Number: A82123

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:
619-233-8500
License Number: C53121
NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638


 Phone: 619-233-8500


 After Hours Phone:
619-233-8500

License Number: G29879

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500

License Number: G71080
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500

License Number: A104052
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 Website: N/A

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422


License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL
 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422


License Number: PA20888
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL

 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422


License Number: PA53788
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529
 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
Fax: 619-269-0053


 After Hours Phone:
619-515-2422
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
Fax: 619-269-0053

 After Hours Phone:

619-515-2422
License Number: 550003113
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL



 Website: www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE


Provider ID: 517403
 316 25TH ST
SAN DIEGO, CA 92102-3016
 Phone: 619-662-4100
Fax: 619-238-3807

 After Hours Phone:
619-662-4100
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435
License Number: A80504
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
Fax: 619-515-2435


 After Hours Phone:
619-515-2435

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-238-5551

 After Hours Phone:
619-238-5551

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A156607

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP20849

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 Website: N/A

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP8563

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

Fax: 619-662-4158

 After Hours Phone:
619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A96919

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: NP15657

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: DC27523

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: A165432

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A45942

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A79383

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-428-4463*

 *After Hours Phone:
619-428-4463*

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER


 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A153223

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: 20A8204

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: 20A7435

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: KING CHAVEZ HEALTH CENTER

 *Website: www.ihpsocal.org*

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A101017

NPI: 1598122871



Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No





*American Sign Language (ASL):
N*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: KING CHAVEZ HEALTH CENTER
 *Website: www.ihpsocal.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP11778
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*



LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP17852
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP2286
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*



LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP95000205
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*




Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP95000602
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone: 619-515-2300*
 *After Hours Phone: 619-515-2300*
License Number: NP95001705
NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95003689

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95022452


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA13752

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA17864


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Site English Spoken: Yes
Cultural Competency: No

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA54661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PT295463


NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone: 619-515-2300*


 *After Hours Phone:*
619-515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone: 619-515-2300*


 *After Hours Phone:*
619-515-2300

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone: 619-515-2300*


 *After Hours Phone:*
619-515-2300

License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone: 619-515-2300*


 *After Hours Phone:*
619-515-2300

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 *Phone: 619-515-2300*


 *After Hours Phone:*
619-515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

Fax: 619-515-2510

 After Hours Phone:
619-515-2300

License Number: A178494


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A12796


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


HEALTH CTR SAN DIEGO-OAK PARK

 Website: www.fhcsd.org


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:
619-515-2454

License Number: 550003556

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK

 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112379

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120447

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120576

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153414

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A162332

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C54198

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33300

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHC - OCEAN VIEW

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-595-0258

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:
619-662-4100


License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-263-2499

 After Hours Phone:
619-263-2499

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:
619-515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

Site English Spoken: Yes

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A15471

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND N
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A108228

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:

619-515-2560

License Number: A113448

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:

619-515-2560

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:

619-515-2560

License Number: A115598

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC


 Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:

619-515-2560

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC


 Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:

619-515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY

HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A140912

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A178499


NPI: 1134155377

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC




 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A12653

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A12732

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A15743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: 20A17072

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A17478

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A108228

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A118095


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 *Website: www.fhcsd.org*






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

D. Blue Shield Promise Medi-Cal 網絡內提供者清單







D1. 具備聯邦資質的健康診所

 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A142703
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A146111
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org







LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A146838
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org






LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A147939
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: A151631
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A160489

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes




Cultural Competency: No

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所




American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A164889
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A177373
NPI: 1134155377
Accepting New Patients: Yes




Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org



LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A169752
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A177462



NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A178499
NPI: 1134155377





Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


 *After Hours Phone:*
619-515-2300
License Number: A181809
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A46161
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A61687
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A68124
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A71671
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A77126

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A93385

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: A97036</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: C174771</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: DPM4819</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: DPM5661</i></p> <p><i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p> <p><i>License Number: G78814</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p><i>Provider ID: 206360</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> <i>Phone: 619-515-2300</i></p> <p> <i>After Hours Phone: 619-515-2300</i></p>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: G81658
NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP10906

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA58081

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 Website: www.fhcsd.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

Fax: 619-263-2499

After Hours Phone:
619-515-2560

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

Fax: 619-263-2499

After Hours Phone:
619-515-2560

License Number: A100391

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i> <i>License Number: NP17362</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i> <i>License Number: NP19911</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i></p>	<p><i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i> <i>License Number: NP95000205</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i> <i>License Number: NP95001492</i> <i>NPI: 1134155377</i></p>	<p><i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i> <i>License Number: NP95005321</i> <i>NPI: 1134155377</i> <i>Accepting New Patients: Yes</i> <input type="checkbox"/> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i>  <i>Website: www.fhcsd.org</i></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC <i>Provider ID: 206363</i>  4725 MARKET ST SAN DIEGO, CA 92102-4715  <i>Phone: 619-515-2560</i>  <i>After Hours Phone: 619-515-2560</i></p>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND

NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA20378

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY


HLTH CTRS INC

 Website: www.fhcsd.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

License Number: 550002478

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM


TH-F 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation
Samahan

 Website: www.operationsamahan.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

License Number: 550003857

NPI: 1699216622

Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550003857

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: Operation

Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

License Number: 080000146

NPI: 1871680397

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: Y

Hours: M-F

8:00AM-4:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

Fax: (858) 536-8034

After Hours Phone: (844)
200-2426

License Number: 080000146

NPI: 1861933897

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Operation
Samahan

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)
200-2426

License Number: 550002478

NPI: 1699216622

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: Operation Samahan
Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License Number: 550001474
NPI: 1215246996
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

Cultural Competency: Y
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ibclinic.org
Email: avaldez@ibclinic.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394

After Hours Phone: (619) 515-2444
License Number: 080000115
NPI: 1386689701
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: sabay@fhcsd.org

SAN DIEGO FAMILY CARE

Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
NPI: 1457724858
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: Y
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: Y
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

NPI: 1780665877

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: Y

🕒 Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.sdfamilycare.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

Fax: (619) 501-9645

☎ After Hours Phone: (619) 515-2545

License Number: 550003099

NPI: 1629456900

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-TH
8:00AM-9:00PM
F 8:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

🌐 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

📍 316 25TH ST
SAN DIEGO, CA 92102

☎ Phone: (619) 238-5551

Fax: (619) 238-3807

☎ After Hours Phone: (619) 238-5551

NPI: 1598308926

Accepting New Patients: Yes

Min/Max Age: 0\120

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

📍 2391 ISLAND AVE
SAN DIEGO, CA 92102

☎ Phone: (619) 515-2435

Fax: (619) 515-2435

☎ After Hours Phone: (619) 515-2435

NPI: 1174549232

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

🌐 Website: N/A

Email: dalvarado@fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

📍 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

☎ Phone: (619) 515-2422

Fax: (619) 269-0053

☎ After Hours Phone: (619) 515-2422

License Number: 550003113

NPI: 1235521782

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)
233-8500

License Number: 090000297

NPI: 1598122871

Accepting New Patients: No

Min/Max Age: 0\999

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

Fax: (619) 501-5814

After Hours Phone: (619)
515-2525

License Number: 550002865

NPI: 1952729303

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: janeta@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 234-2447

After Hours Phone: (619)
515-2300

NPI: 1447281936

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

Fax: (619) 824-9076

After Hours Phone: (619)
662-4100

License Number: 550003882

NPI: 1205477841

Accepting New Patients: Yes

Min/Max Age: 0\120

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (619)
280-4213

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

Website: www.lamaestra.or
g

Email:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

aschmaltz@lamaestra.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 683-7586

After Hours Phone: (619)
515-2424

License Number: 090000469

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\18

Site English Spoken: Y
Cultural Competency: N

Hours: M-TH
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619)
515-2424

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): Min/Max Age: 0\150

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)
515-2426

License Number: 550003108

NPI: 1477953933

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

NPI: 1962483040

Accepting New Patients: Yes

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

Site English Spoken: Y
Cultural Competency: Y

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.sdfamilycare.org

DOWNTOWN FAMILY CTR AT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CONNECTIONS

Provider ID: 417782

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619)
515-2430

License Number: 550002251

NPI: 1588901045

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: jinah@fhcsd.org

FAMILY HEALTH CTR OF SD- ELM ST

Provider ID: 419167

140 ELM ST
SAN DIEGO, CA 92101

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)
515-2520

License Number: 550002061

NPI: 1316419070

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: jinah@fhcsd.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

License Number: 090000168

NPI: 1003902917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Korean, Spanish, Hindi

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: WWW.SDAIHC.ORG

Indian Health Services: Y

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE

SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619)
662-4100

NPI: 1538262092

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Spanish, Tagalog,
Vietnamese

Cultural Competency: Y

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org/clinics/king-chavez-health-center

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619)
515-2560

NPI: 1982747671

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y



Cultural Competency: N

American Sign Language (ASL):









N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單



D1. 具備聯邦資質的健康診所


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org



SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*
 *Phone: (619) 662-4100*
Fax: (619) 595-0258
 *After Hours Phone: (619) 662-4100*
NPI: 1326225632
Accepting New Patients: Yes
Min/Max Age: 0\150
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: , Spanish*
Cultural Competency: Y
 *Hours: M-F
8:00AM-5:00PM*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP of Southern Cal-PHP
 *Website: <https://www.syhealth.org/locations>*





LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 624977
 *2204 NATIONAL AVE
SAN DIEGO, CA 92113*
 *Phone: (619) 515-2355*
Fax: (619) 232-7011
 *After Hours Phone: (619)*

515-2355
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
 *Site English Spoken: Y*
Cultural Competency: N
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*








FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 664747
 *2114 NATIONAL AVE
SAN DIEGO, CA 92113*
 *Phone: (619) 515-2406*
 *After Hours Phone: (619) 515-2406*
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\999
 *Site English Spoken: Y*
Cultural Competency: N
 *Hours: M-F
8:30AM-5:30PM*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*






FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 *5160 FEDERAL BLVD
SAN DIEGO, CA 92105*
 *Phone: (619) 515-2454*
Fax: (619) 794-2696
 *After Hours Phone: (619) 515-2454*
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\150
 *Site English Spoken: Y*
Cultural Competency: N
 *Hours: M-F
8:30AM-5:30PM*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

SAN MARCOS

TRUECARE

Provider ID: 625875
 *1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973*
 *Phone: 760-736-6767*
 *After Hours Phone:
760-736-6767*
License Number: G74757
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: TRUECARE  Accessibility: CONTACT PROVIDER
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: 20A15159

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Medical Group/IPA: TRUECARE  Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A48980

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A71311

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A63903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A60958

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: G71182

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NM235844

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95001653

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95002545

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95003903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:

760-736-6767

License Number: PA17101

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org





TRUECARE

Provider ID: 625875






 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所





 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NM235997
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP18874
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100

SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP20893
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org






TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP21368
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450
 Phone: 760-520-8200
Fax: 360-462-2749
 After Hours Phone:
760-520-8200
License Number: 80000167
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org


TRUECARE

Provider ID: 625875


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

Fax: 760-736-8740

 After Hours Phone:
760-736-6767

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org


TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

Fax: 760-736-8740

 After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA51867

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org


TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: NP18788

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org  Website: www.ihpsocal.org  Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: 1598122871


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org  Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: PA17718


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org  Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

TRUECARE

Provider ID: 206426

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1811617939


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y


Site Language(s) Spoken:
Spanish

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1598484255

Accepting New Patients: Yes

Min/Max Age: 0\150

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ihpsocal.org

SAN YSIDRO

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A71304

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A72235

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A99433

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A84160

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A93785

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A77936

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007


 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A80832

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: G80107

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: G81461

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DC33693

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: C42207

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: DPM2930


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


























Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所






<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> Website: www.ihpsocal.org</p>	<p>619-662-4100</p> <p>License Number: NP95003355</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: NP12112</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: PA20490</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>
<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: PA17162</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p><input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> Website: www.ihpsocal.org</p>
<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p>Provider ID: 206292</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone:</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>	<p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p>Provider ID: 227411</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> Phone: 619-662-4100</p> <p>Fax: 619-205-6305</p> <p> After Hours Phone: 619-662-4100</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p>



D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*







SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-205-6341*
 *After Hours Phone:*
619-205-6341
License Number: A64487
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N






 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-428-4463*
 *After Hours Phone:*
619-428-4463
License Number: 20A8245
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*






SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-428-4463*
 *After Hours Phone:*
619-428-4463
License Number: A112627
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: 20A10964
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken:*
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: 20A11153
NPI: 1598122871
Accepting New Patients: Yes

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007



 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD


HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone: 619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone: 619-662-4100

License Number: G20087

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT


PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone: 619-662-4100

License Number: A82187

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A101017

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A101827

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: 20A8081

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: 20A9907

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: 20A17643

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007






Phone: 619-662-4100

D. Blue Shield Promise Medi-Cal 網絡內提供者清單






D1. 具備聯邦資質的健康診所

 *After Hours Phone:*
619-662-4100
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 *Website:* www.ihpsocal.org



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR



Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: A111118
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR






Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: 20A12555
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR



Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: 20A14222
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: 20A14949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: 20A8516

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A175006

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A178949

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A169577

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113914

NPI: 1598122871

Accepting New Patients: Yes



























Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p><i>Provider ID: 227411</i></p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A138938</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p><i>Provider ID: 227411</i></p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p>	<p><i>License Number: A157505</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p><i>Provider ID: 227411</i></p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: G52183</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p>	<p><i>Provider ID: 227411</i></p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-1948</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A49307</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p><i>Provider ID: 227411</i></p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-1948</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A63844</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><input type="checkbox"/> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: A72721

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C158543

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C160626

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A94813

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: C149818

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A74960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A49267

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A40480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A180886

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No


American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所




Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A177337
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A175006
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A170738
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A173435
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A158364
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No

D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A138568
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No



American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100


After Hours Phone: 619-662-4100
License Number: A159673
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A169694
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO

HEALTH CENTER
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A157505
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: A145008
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes


D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Site Languages(s) Spoken:*
*Spanish, Tagalog,
Portuguese*

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone:
619-662-4100*

License Number: A145480

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese*

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone:
619-662-4100*

License Number: A131952

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese*

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone:
619-662-4100*

License Number: A132982

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese*

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone:
619-662-4100*

License Number: A127188

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese*

Cultural Competency: No

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER*


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: A130348

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A131021

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A113482

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A114008

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org





SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER





Provider ID: 206292


4004 BEYER BLVD
SAN YSIDRO, CA

D. Blue Shield Promise Medi-Cal 網絡內提供者清單






D1. 具備聯邦資質的健康診所

92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A125329
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**
Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A104660
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org






**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**
Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT302385
NPI: 1598122871
Accepting New Patients: Yes

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS




Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT302385
NPI: 1598122871
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
Fax: 619-600-4870
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G66745

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95001960

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95003721

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95004315

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95003671

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: PA58672

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95017732

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95019995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-600-4867

After Hours Phone:
619-600-4867

License Number: PA22855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER


D. Blue Shield Promise Medi-Cal 網絡內提供者清單


D1. 具備聯邦資質的健康診所


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4870

 After Hours Phone:
619-600-4870

License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C42207

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A51843

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A32571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153975

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

NPI: 1801438239


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: ,
Spanish

Cultural Competency: Y

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: <https://www.syhe>

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

alth.org/locations

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

NPI: 1952364747

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: Y

Hours: M-F
8:00AM-5:30PM
SA 8:30AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org/clinics/san-ysidro-health-center

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1967

After Hours Phone: (619)
662-4100

NPI: 1558852947

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: Y

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: syhealth.org/clinics/maternal-child-health-center

SPRING VALLE

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org




**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555

License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org




**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A116680

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555

License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A149063
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org



**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A169342
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A154298
NPI: 1134155377

































Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: PA54588 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: NP10943 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>	<p> After Hours Phone: 619-515-2555 License Number: A55932 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: A178499 NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p> <p> After Hours Phone: 619-515-2555</p> <p>License Number: G78814 NPI: 1134155377</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p>Provider ID: 206361</p> <p> 8788 JAMACHA RD SPRING VALLE, CA 91977-4035</p> <p> Phone: 619-515-2555</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p> <p> Website: www.fhcsd.org</p> <p>GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</p>

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A76059

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC



Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

Fax: 619-462-5584

After Hours Phone:
619-515-2555

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: C174771

NPI: 1134155377

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

🌐 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

📍 8788 JAMACHA RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 515-2555

Fax: (619) 462-5584

🕒 After Hours Phone: (619) 515-2555

NPI: 1508801069

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family

Health Centers of San Diego

🌐 Website: www.fhcsd.org

Email: angelad@fhcsd.org

VALLEY CENTER

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD

VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

🕒 After Hours Phone: (760) 742-9919

License Number: 080000483

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

🕒 After Hours Phone: (760) 742-9919

License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

🕒 After Hours Phone: (760) 742-9919

License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

☐ Site English Spoken: Y

Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

🌐 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

📍 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

Fax: (360) 462-2750

🕒 After Hours Phone: (760) 742-9919

License Number: 080000483





NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999







D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A




VISTA

VCC DURIAN







Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone:
844-308-5003
License Number: 1851300123
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VCC
DURIAN
 Website: N/A

VCC DURIAN

Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone:




844-308-5003
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VCC
DURIAN
 Website: N/A

VCC DURIAN







Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003
Fax: 760-414-3892
 After Hours Phone:
844-308-5003
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VCC
DURIAN
 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE


Provider ID: 400339
 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: DC32054
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE





Provider ID: 400339
 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: PA20775
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE






Provider ID: 400339
 134 GRAPEVINE RD
VISTA, CA 92083-4004

D. Blue Shield Promise Medi-Cal 網絡內提供者清單






D1. 具備聯邦資質的健康診所

 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: RN410247
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A






VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
Fax: 760-414-3892
 After Hours Phone:
760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A






VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339
 134 GRAPEVINE RD
VISTA, CA 92083-4004
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: NP7791
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE
 Website: N/A





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: PA19629
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003
License Number: NP11448
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommu
nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003
License Number: PA20775
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95009149

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95003571

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP10896

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338



 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000






 After Hours Phone:

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所






760-631-5000
License Number: G86902
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: G79676
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338






 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: C162072
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC





Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: C171929
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

nityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: C52564
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: DC32054
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: DPM3999
NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: G51286

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-414-3892
 After Hours Phone:
760-414-3892

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-414-3892
 After Hours Phone:
760-414-3892

License Number: NP23217


NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish


Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: A62780

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish



Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC




 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000

D. Blue Shield Promise Medi-Cal 網絡內提供者清單






D1. 具備聯邦資質的健康診所

 After Hours Phone:
760-631-5000
License Number: A80635
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: C143703
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A13745
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A18374
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A7241
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000
License Number: 20A8949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone: 760-631-5000*
 *After Hours Phone: 760-631-5000*
License Number: A125026
NPI: 1598122871




Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website: www.vistacommunityclinic.org*


VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone: 760-631-5000*
 *After Hours Phone: 760-631-5000*
License Number: A173511
NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*


VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone: 760-631-5000*
 *After Hours Phone: 760-631-5000*
License Number: A56214
NPI: 1598122871

Accepting New Patients: Yes




Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*




VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone: 760-414-3892*
 *After Hours Phone: 760-414-3892*
License Number: NP95003087

NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 *Phone: 760-414-3892*
Fax: 760-414-3892
 *After Hours Phone: 760-414-3892*
License Number: 20A9149
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website: www.vistacommunityclinic.org*


VISTA COMMUNITY CLINIC GRAPEVINE


Provider ID: 400339

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 135 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 136 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC


GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

License Number: 080000328


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: Y

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

License Number: 1851300123


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: Y


 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

License Number: 080000328


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999


 Site English Spoken: Y

Cultural Competency: Y


 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org

D2. 初級保健名錄

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802


Provider Gender: Male


License Number: NP95006360


NPI: 1821306598

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802


Provider Gender: Female


License Number: NP23004


NPI: 1760765333


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802


Provider Gender: Female


License Number: NP23004


NPI: 1760765333


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335


NPI: 1619040292


Provider English Spoken: Y


Provider Language(s)
Spoken: Burmese


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED

Provider ID: 517802

Provider Gender: Male

License Number: DC28335


NPI: 1619040292


Provider English Spoken: Y


Provider Language(s)
Spoken: Burmese


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733


NPI: 1174656755


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male


License Number: DC22733


NPI: 1174656755


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517802

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517802

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802

Provider Gender: Female

License Number: C172036


NPI: 1740535152


Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802

Provider Gender: Female

License Number: C172036


NPI: 1740535152


Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

D2. 初級保健名錄


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


VAN HOLLEBEKE, RACHEL

Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


VAN HOLLEBEKE, RACHEL


Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

 1620 ALPINE BLVD STE 110

ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

WYLIE, BLAKE

D2. 初級保健名錄

Provider ID: 517802

Provider Gender: Male


License Number: 20A11088


NPI: 1922314145


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


FQHC


SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802


NPI: 1770124315


 Provider English Spoken: Y
Cultural Competency: N

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802


NPI: 1770124315

 Provider English Spoken: Y
Cultural Competency: N

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STENSMAN, LARS

Provider ID: 595793

Provider Gender: Male

NPI: 1659638062


 Provider English Spoken: Y
 Provider Language(s)

Spoken: Danish, French,
Norwegian, Swedish

Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100
Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STENSMAN, LARS


Provider ID: 517802

Provider Gender: Male

License Number: A158569


NPI: 1659638062


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER

PEDIATRICS

STENSMAN, LARS





Provider ID: 517802

D2. 初級保健名錄

Provider Gender: Male
License Number: A158569
NPI: 1659638062
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish
Cultural Competency: N
Board Certified Specialty: No
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT






BAISLEY, SHAWN

Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER





PHYSICIANS ASSISTANT


BAISLEY, SHAWN

Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT





SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

YOUNG, JENNIFER


Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
 Provider English Spoken: Y


D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*


 *After Hours Phone: (760)
736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120

Provider Gender: Female

License Number: NP95003087

NPI: 1558701094


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*


 *After Hours Phone: (760)
736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


YOUNG, JENNIFER

Provider ID: 480120

Provider Gender: Female

License Number: NP95003087

NPI: 1558701094


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


YOUNG, JENNIFER

Provider ID: 480120

Provider Gender: Female

License Number: NP95003087

NPI: 1558701094


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

TRUECARE,

Provider ID: 480120


NPI: 1245246917

 *Provider English Spoken: Y*

Cultural Competency: N

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 *Phone: (760) 736-6767*

Fax: (760) 720-7204

 *After Hours Phone: (760)
736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

TRUECARE,

Provider ID: 480120

NPI: 1245246917


 *Provider English Spoken: Y*


Cultural Competency: N

D2. 初級保健名錄


 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

 Fax: (760) 720-7204

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE


PONIACHIK, SAMUEL


Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

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Spoken: Spanish


Cultural Competency: N


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 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

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DR STE 100

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Phone: (760) 736-6767

After Hours Phone: (760)
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Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PEDIATRICS

BURGAMY, ELIZABETH

Provider ID: 326275

Provider Gender: Female


D2. 初級保健名錄


NPI: 1164609558


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

 Phone: (760) 633-3640
Fax: (760) 633-3644

 After Hours Phone: (760)
633-3640

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273


NPI: 1265448112


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)

736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS


IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273


NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273


NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil


Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

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736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273


NPI: 1265448112


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)

D2. 初級保健名錄

736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MUTH, NATALIE

Provider ID: 328451
Provider Gender: Female
NPI: 1497982888
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760)
633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

O'CONNOR, ERICA
Provider ID: 651599
Provider Gender: Female
NPI: 1134782725
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760)
633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TANAKA, MARY

Provider ID: 465387
Provider Gender: Female
NPI: 1295962686
Provider English Spoken: Y
Provider Language(s)
Spoken: Thai
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009
Phone: (760) 633-3640
Fax: (760) 633-3644

After Hours Phone: (760)
633-3640
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

D2. 初級保健名錄

Provider ID: 480120

Provider Gender: Male

License Number: PA22667


NPI: 1174964001


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

Fax: (760) 720-7204

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

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Cultural Competency: N

Hospital Affiliation:

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Board Certified Specialty: No

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CARLSBAD, CA 92008

 Phone: (760) 736-6767

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736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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Hours: M-F 8:00AM-5:00PM
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 Website: N/A

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480120


Provider Gender: Female


License Number: PA53036


NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480120


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License Number: PA53036


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Cultural Competency: N

Board Certified Specialty: No

 1295 CARLSBAD VILLAGE
DR STE 100
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 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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Cultural Competency: N

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Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CHULA VISTA

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322

Provider Gender: Female

License Number: C52581

NPI: 1053300251


Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 427322

Provider Gender: Female

License Number: C52581

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Hospital Affiliation:


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355

Provider Gender: Female

License Number: NP23687


D2. 初級保健名錄


NPI: 1952737033

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355

Provider Gender: Female


License Number: NP23687


NPI: 1952737033

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): License Number: NP10943
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

NPI: 1285772392


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492


NPI: 1073869145


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL



Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145


D2. 初級保健名錄


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480


NPI: 1841200482


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579


NPI: 1841200482


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480

NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

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662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579


NPI: 1841200482


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
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662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL


Provider ID: 427322

Provider Gender: Female


License Number: NP95015413


D2. 初級保健名錄


NPI: 1548683378

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female


License Number: NP22000


NPI: 1821346826


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SICKLES, MAGGIE

Provider ID: 427322


Provider Gender: Female


License Number: NP22000


NPI: 1821346826

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA


Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

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 Website: www.fhcsd.org
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MARTHAO@FHCS.D.ORG


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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CHULA VISTA, CA 91910

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Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED REGISTERED NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. 初級保健名錄

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
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515-2500
 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

MARTINEZ, NANCY

Provider ID: 427322

Provider Gender: Female

License Number: NM1539

NPI: 1578576070

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

MARTINEZ, NANCY

Provider ID: 427322

Provider Gender: Female

License Number: NM1539

NPI: 1578576070

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269


NPI: 1952950776


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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CHULA VISTA, CA 91910

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515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269


NPI: 1952950776


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
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Email:

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

D2. 初級保健名錄

CHIROPRACTOR


KAZEM, HARON

Provider ID: 427322

Provider Gender: Male

License Number: DC33295


NPI: 1306221262

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


KAZEM, HARON


Provider ID: 427322

Provider Gender: Male

License Number: DC33295


NPI: 1306221262

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Board Certified Specialty: No


 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322


Provider Gender: Male

License Number: DC31963


NPI: 1760464960


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322


Provider Gender: Male

License Number: DC31963


NPI: 1760464960


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322


Provider Gender: Male

License Number: DC20760


NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male

License Number: DC20760

NPI: 1285921627

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 427322

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 427322

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

678 3RD AVE
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662-4100

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

D2. 初級保健名錄

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

VINCENT, LAUREN

Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES



VINCENT, LAUREN


Provider ID: 427322

Provider Gender: Female
License Number: A134303
NPI: 1053757997
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
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al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALANIZ, MATEO

Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AMANAT, SOROOSH

Provider ID: 427322
Provider Gender: Male

D2. 初級保健名錄

License Number: A153022

NPI: 1003279621

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
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Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

AMANAT, SOROOSH

Provider ID: 427322

Provider Gender: Male

License Number: A153022

NPI: 1003279621

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

678 3RD AVE

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

License Number: A123604

NPI: 1053532986

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

678 3RD AVE

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Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

251 LANDIS AVE
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Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ELSAIED, MOHAMMED

Provider ID: 19561

Provider Gender: Male

NPI: 1821033424

Provider English Spoken: Y
Provider Language(s)

Spoken: Arabic, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

Phone: (619) 409-1802

Fax: (619) 409-1831

After Hours Phone: (619)
409-1802

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM


FAMILY PRACTICE

ELSAYED, MOHAMMED

Provider ID: 19561
Provider Gender: Male
NPI: 1821033424
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, German, Spanish

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
 *330 OXFORD ST STE 106 CHULA VISTA, CA 91911*
 *Phone: (619) 409-1802*
Fax: (619) 409-1831
 *After Hours Phone: (619) 409-1802*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322
Provider Gender: Female
License Number: A120672
NPI: 1154647410


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

 *678 3RD AVE CHULA VISTA, CA 91910*
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

GARCIA, KARLA




Provider ID: 427322
Provider Gender: Female
License Number: A120672
NPI: 1154647410

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

 *678 3RD AVE CHULA VISTA, CA 91910*
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


HUBLEY, PAUL

Provider ID: 206355
Provider Gender: Male
License Number: A73172
NPI: 1568496974

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No


 *251 LANDIS AVE CHULA VISTA, CA 91910*
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcscd.org*
Email: MARTHAO@FHCSO.ORG
Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male

License Number: A73172


NPI: 1568496974


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

JIMENEZ, KRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: A159831


NPI: 1922531250


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

JIMENEZ, KRYSTAL

Provider ID: 427322


Provider Gender: Female


License Number: A159831


NPI: 1922531250


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922


NPI: 1679137780


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

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 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922


NPI: 1679137780


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

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D2. 初級保健名錄

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No

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662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

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662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

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 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE


MENON, POOJA

Provider ID: 427322

Provider Gender: Female


License Number: A123263

NPI: 1053600064


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MENON, POOJA

Provider ID: 427322

Provider Gender: Female


License Number: A123263

NPI: 1053600064


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MERRILL, SARAH

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MERRILL, SARAH

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA



Board Certified Specialty: No

D2. 初級保健名錄



 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322
Provider Gender: Female
License Number: A80185
NPI: 1093844417
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE



Provider ID: 427322
Provider Gender: Female
License Number: A106103
NPI: 1174781132
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH



Provider ID: 417641
Provider Gender: Female
License Number: A144995
NPI: 1619357993
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619)
515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

Provider ID: 417641
Provider Gender: Female
License Number: A144995
NPI: 1619357993
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619)
515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132


Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

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 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


D2. 初級保健名錄


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

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 Website: www.fhcsd.org


Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): *Cultural Competency: N*
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


PINA, RAQUEL

Provider ID: 206355
Provider Gender: Female
License Number: A177698
NPI: 1255893368

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email: MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


PINA, RAQUEL

Provider ID: 206355
Provider Gender: Female
License Number: A177698
NPI: 1255893368

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


PISINGER, PATRICIA

Provider ID: 427322
Provider Gender: Female
License Number: A69264
NPI: 1861428302

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


PISINGER, PATRICIA

Provider ID: 427322
Provider Gender: Female
License Number: A69264
NPI: 1861428302

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 678 3RD AVE

D2. 初級保健名錄

CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322
Provider Gender: Female

License Number: G74728
NPI: 1124039136
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SERPAS, SHAILA

Provider ID: 427322
Provider Gender: Female
License Number: G74728
NPI: 1124039136
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 427322
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061


NPI: 1740337161

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

D2. 初級保健名錄

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITLEY, NICHOLAS

Provider ID: 427322

Provider Gender: Male

License Number: A118250

NPI: 1629394721

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322

Provider Gender: Male

License Number: A114600

NPI: 1942435144

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322

Provider Gender: Male

License Number: A114600

NPI: 1942435144

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

D2. 初級保健名錄


CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355


NPI: 1346480837

 Provider English Spoken: Y
Cultural Competency: N

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500
Fax: (619) 397-1161

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


FQHC


CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355


NPI: 1346480837

 Provider English Spoken: Y
Cultural Competency: N

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500
Fax: (619) 397-1161

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FQHC


CHULA VISTA PEDIATRICS,


Provider ID: 482034

NPI: 1326486861

 Provider English Spoken: Y
Cultural Competency: N

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 Phone: (619) 662-4100
Fax: (619) 662-4196


 After Hours Phone: (619)
662-4100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-4:00PM

FQHC


CHULA VISTA PEDIATRICS,

Provider ID: 482034

NPI: 1326486861

 Provider English Spoken: Y
Cultural Competency: N

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 Phone: (619) 662-4100
Fax: (619) 662-4196


 After Hours Phone: (619)
662-4100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-4:00PM

FQHC

FAMILY HLTH CTR SAN


DIEGO-RICE FAM HC,

Provider ID: 417641


NPI: 1083959464

 Provider English Spoken: Y
Cultural Competency: N

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325
Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325


 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN


DIEGO-RICE FAM HC,

Provider ID: 417641


NPI: 1083959464

 Provider English Spoken: Y
Cultural Competency: N

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325
Fax: (619) 420-0660

 After Hours Phone: (619)
515-2325


 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH CHULA VISTA,


Provider ID: 427322

NPI: 1326486861

 Provider English Spoken: Y
Cultural Competency: N


 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM


FQHC

SAN YSIDRO HEALTH CHULA VISTA,


Provider ID: 427322

NPI: 1326486861


 Provider English Spoken: Y
Cultural Competency: N


 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322


Provider Gender: Female

License Number: DDS102880


NPI: 1366917353


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322


Provider Gender: Female

License Number: DDS102880


NPI: 1366917353


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457


NPI: 1295362242

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE


CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

D2. 初級保健名錄

/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


GENERAL PRACTICE


SAMI, REMAN

Provider ID: 427322
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA

Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301
 Provider English Spoken: Y



 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY







QUIROZ, ELISA

Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE

CHEN, TSUH YIN

Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


CHEN, TSUH YIN


Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



DALHOUMI, SARAH

Provider ID: 427322

Provider Gender: Female


License Number: A121861

NPI: 1033435383


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


DALHOUMI, SARAH

Provider ID: 427322

Provider Gender: Female

License Number: A121861


NPI: 1033435383

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HAMMETT, ERIN

Provider ID: 427322

Provider Gender: Female

License Number: 20A14025

NPI: 1467884098

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HAMMETT, ERIN

Provider ID: 427322

Provider Gender: Female

License Number: 20A14025

D2. 初級保健名錄

NPI: 1467884098

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KAKAIYA, ROSHNI

Provider ID: 427322

Provider Gender: Female

License Number: 20A19485

NPI: 1073179529

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

KAKAIYA, ROSHNI

Provider ID: 427322

Provider Gender: Female

License Number: 20A19485

NPI: 1073179529

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

UWEDJOJEVWE, LETICIA

Provider ID: 380242

Provider Gender: Female

NPI: 1891882221

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

340 4TH AVE STE 10
CHULA VISTA, CA 91910

Phone: (619) 934-2215

Fax: (619) 500-5955

After Hours Phone: (619)
934-2215

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM
F 8:00AM-4:00PM

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

D2. 初級保健名錄

VISTA

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206355
Provider Gender: Male
License Number: A113001
NPI: 1225231582

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA


Provider ID: 206355
Provider Gender: Female
License Number: A118095

NPI: 1073701041

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206355
Provider Gender: Female
License Number: A118095
NPI: 1073701041


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM



OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206355
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*


 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): Cultural Competency: N

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male


License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY


Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY


Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

D2. 初級保健名錄

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 206355

Provider Gender: Female

License Number: A148014

NPI: 1457794752



Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 206355

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA


Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

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 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355

Provider Gender: Female

License Number: A116680

NPI: 1700073962



 Provider English Spoken: Y


D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*
 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL


Provider ID: 206355

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL


Provider ID: 206355

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

 *After Hours Phone: (619) 515-2500*

 *Website: www.fhcsd.org*

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO


Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, KERN


MEDICAL CENTER

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/chula- vista- medic al- plaza*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

D2. 初級保健名錄

PROVIDER		
<u>OBSTETRICS / GYNECOLOGY</u>	RODRIGUEZ JEREZ, ROBERTO	<i>Hospital Affiliation: SCRIPPS</i>
MENDEZ, DIEGO	<i>Provider ID: 206355</i>	<i>MERCY HOSPITAL, SHARP</i>
<i>Provider ID: 427322</i>	<i>Provider Gender: Male</i>	<i>CORONADO HOSP AND</i>
<i>Provider Gender: Male</i>	<i>License Number: A154298</i>	<i>HEALTHCARE CTR,</i>
<i>License Number: A47906</i>	<i>NPI: 1710316450</i>	<i>GROSSMONT HOSPITAL</i>
<i>NPI: 1437181922</i>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>Board Certified Specialty: No</i>
<input type="checkbox"/> <i>Provider Language(s)</i>	<input type="checkbox"/> <i>Provider Language(s)</i>	<input type="checkbox"/> <i>251 LANDIS AVE</i>
<i>Spoken: Spanish</i>	<i>Spoken: Spanish</i>	<i>CHULA VISTA, CA 91910</i>
<i>Cultural Competency: N</i>	<i>Cultural Competency: N</i>	<input type="phone"/> <i>Phone: (619) 515-2500</i>
<i>Hospital Affiliation: MERCY</i>	<i>Hospital Affiliation: SCRIPPS</i>	<input type="phone"/> <i>After Hours Phone: (619)</i>
<i>GENERAL HOSPITAL, SCRIPPS</i>	<i>MERCY HOSPITAL, SHARP</i>	<i>515-2500</i>
<i>MERCY HOSPITAL CHULA</i>	<i>CORONADO HOSP AND</i>	<input type="website"/> <i>Website: www.fhcsd.org</i>
<i>VISTA, BAKERSFIELD</i>	<i>HEALTHCARE CTR,</i>	<i>Email:</i>
<i>MEMORIAL HOSP, SHARP</i>	<i>GROSSMONT HOSPITAL</i>	<i>MARTHAO@FHCS.D.ORG</i>
<i>MEMORIAL HOSPITAL,</i>	<i>Board Certified Specialty: No</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Adventist Health Bakersfield,</i>	<input type="checkbox"/> <i>251 LANDIS AVE</i>	<i>Min/Max Age: 0\150</i>
<i>SCRIPPS MERCY HOSPITAL,</i>	<i>CHULA VISTA, CA 91910</i>	<i>American Sign Language (ASL):</i>
<i>SCRIPPS MEMORIAL</i>	<input type="phone"/> <i>Phone: (619) 515-2500</i>	<i>N</i>
<i>HOSPITAL, SCRIPPS</i>	<input type="phone"/> <i>After Hours Phone: (619)</i>	<input type="wheelchair"/> <i>Accessibility: CONTACT</i>
<i>MEMORIAL HOSPITAL, KERN</i>	<i>515-2500</i>	<i>PROVIDER</i>
<i>MEDICAL CENTER</i>	<input type="website"/> <i>Website: www.fhcsd.org</i>	<i>Hours: M-F 8:30AM-5:30PM</i>
<i>Board Certified Specialty: No</i>	<i>Email:</i>	
<input type="checkbox"/> <i>678 3RD AVE</i>	<i>MARTHAO@FHCS.D.ORG</i>	<u>OBSTETRICS / GYNECOLOGY</u>
<input type="phone"/> <i>Phone: (619) 662-4100</i>	<i>Medi-Cal Open Panel: Yes</i>	SAPRA, SONIA
<input type="phone"/> <i>After Hours Phone: (619)</i>	<i>Min/Max Age: 0\150</i>	<i>Provider ID: 206355</i>
<i>662-4100</i>	<i>American Sign Language (ASL):</i>	<i>Provider Gender: Female</i>
<input type="website"/> <i>Website: www.syhealth.org</i>	<i>N</i>	<i>License Number: A164859</i>
<i>/clinics/chula- vista- medic</i>	<input type="wheelchair"/> <i>Accessibility: CONTACT</i>	<i>NPI: 1952751711</i>
<i>al- plaza</i>	<i>PROVIDER</i>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>
<i>Medi-Cal Open Panel: Yes</i>	<i>Hours: M-F 8:30AM-5:30PM</i>	<input type="checkbox"/> <i>Provider Language(s)</i>
<i>Min/Max Age: 0\150</i>	<u>OBSTETRICS / GYNECOLOGY</u>	<i>Spoken: Hindi</i>
<i>American Sign Language (ASL):</i>	RODRIGUEZ JEREZ, ROBERTO	<i>Cultural Competency: N</i>
<i>N</i>	<i>Provider ID: 206355</i>	<i>Hospital Affiliation: SCRIPPS</i>
<input type="wheelchair"/> <i>Accessibility: CONTACT</i>	<i>Provider Gender: Male</i>	<i>MERCY HOSPITAL</i>
<i>PROVIDER</i>	<i>License Number: A154298</i>	<i>Board Certified Specialty: No</i>
	<i>NPI: 1710316450</i>	<input type="checkbox"/> <i>251 LANDIS AVE</i>
<u>OBSTETRICS / GYNECOLOGY</u>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>CHULA VISTA, CA 91910</i>
	<input type="checkbox"/> <i>Provider Language(s)</i>	<input type="phone"/> <i>Phone: (619) 515-2500</i>
	<i>Spoken: Spanish</i>	<input type="phone"/> <i>After Hours Phone: (619)</i>
	<i>Cultural Competency: N</i>	<i>515-2500</i>
		<input type="website"/> <i>Website: www.fhcsd.org</i>
		<i>Email:</i>

D2. 初級保健名錄

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org


Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SHARP CORONADO HOSP


AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI


Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP


AND HEALTHCARE CTR,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABI ADE

Provider ID: 427322

Provider Gender: Male

License Number: A114893

NPI: 1750559589

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL, SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/chula- vista- medic

D2. 初級保健名錄

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


SHORT, ABIADÉ

Provider ID: 427322

Provider Gender: Male

License Number: A114893

NPI: 1750559589

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP


CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 206355

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No

251 LANDIS AVE
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Phone: (619) 515-2500
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515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 **Provider English Spoken:** Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 **Phone:** (619) 515-2500

 **After Hours Phone:** (619)
515-2500

 **Website:** www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


MANI, NASRIN


Provider ID: 427322

Provider Gender: Female

License Number: A40473

NPI: 1023061314

 **Provider English Spoken:** Y

 **Provider Language(s)**
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, UCSD


MEDICAL CTR, SHARP CHULA


VISTA MED CTR, GROSSMONT


HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619)
662-4100

 **Website:** www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN


Provider ID: 427322

Provider Gender: Female

License Number: A40473

NPI: 1023061314

 **Provider English Spoken:** Y

 **Provider Language(s)**
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, SHARP


MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619)
662-4100

 **Website:** www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 **Provider English Spoken:** Y

 **Provider Language(s)**
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,


SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL

HOSPITAL

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619)

D2. 初級保健名錄

662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

D2. 初級保健名錄

HOSPITAL

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

AKASHI, MARC

Provider ID: 163322

Provider Gender: Male

NPI: 1205002417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

769 MEDICAL CENTER CT STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350
After Hours Phone: (619) 482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

890 EASTLAKE PKWY STE 200

CHULA VISTA, CA 91914

Phone: (619) 656-6817

Fax: (619) 656-6908

After Hours Phone: (619) 506-1218

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 70456

Provider Gender: Male

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

890 EASTLAKE PKWY STE 200



CHULA VISTA, CA 91914

Phone: (619) 656-6817

Fax: (619) 656-6908

After Hours Phone: (619)

D2. 初級保健名錄

656-6817
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS


BROUDY, ABRAHAM

Provider ID: 109328
Provider Gender: Male
NPI: 1528039526
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
 2440 FENTON ST STE 100
CHULA VISTA, CA 91914
 Phone: (619) 656-3040
Fax: (619) 656-3045
 After Hours Phone: (619)
656-3040
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CAPETANAKIS, ELENI

Provider ID: 89610
Provider Gender: Female
NPI: 1346211554
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Board Certified Specialty: No
 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910
Fax: (619) 426-2337
 After Hours Phone: (619)
426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS






CORDOBA, MIGUEL

Provider ID: 88187
Provider Gender: Male
NPI: 1053382176
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N



Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910
Fax: (619) 426-2337
 After Hours Phone: (619)
426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

DONG, TAMMY





Provider ID: 427322
Provider Gender: Female
License Number: A66903
NPI: 1386655413
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


D2. 初級保健名錄

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

DONG, TAMMY

Provider ID: 427322
Provider Gender: Female
License Number: A66903
NPI: 1386655413
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100
Provider Gender: Female
NPI: 1013005636
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC, RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910
Fax: (619) 426-2337
 After Hours Phone: (619) 426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


FLETCHER, EMILY

Provider ID: 232312
Provider Gender: Female
NPI: 1780935940
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, RADY CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
 2440 FENTON ST STE 100
CHULA VISTA, CA 91914
 Phone: (619) 656-3040
Fax: (619) 656-3045
 After Hours Phone: (619) 656-3040
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652
Provider Gender: Male
NPI: 1043848807
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 865 3RD AVE STE 101
CHULA VISTA, CA 91911
 Phone: (619) 426-7910
Fax: (619) 426-2337
 After Hours Phone: (619) 426-7910
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

 1741 EASTLAKE PKWY STE
107

CHULA VISTA, CA 91915

 Phone: (619) 482-1700

Fax: (619) 475-4578

 After Hours Phone: (619)
482-1700

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GARCIA, CARLOS

Provider ID: 64734

Provider Gender: Male

NPI: 1417959370

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY


CHILDRENS HOSPITAL SAN

DIEGO


Board Certified Specialty: No


 1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

 Phone: (619) 271-4059

Fax: (619) 271-7451

 After Hours Phone: (619)
271-4059

 Website: N/A

Email:

HERITAGEPARKPEDIATRICS@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY


CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

 Phone: (619) 656-0206

Fax: (619) 656-8936

 After Hours Phone: (619)
656-0206


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 482034

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 482034

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y


Provider Language(s) Spoken: Farsi


Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 *855 3RD AVE STE 2200 CHULA VISTA, CA 91911*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 634787

Provider Gender: Female

NPI: 1508904657

Provider English Spoken: Y


Provider Language(s) Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 *280 E ST CHULA VISTA, CA 91910*

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HOLLICK, NATALIE

Provider ID: 473802


Provider Gender: Female

NPI: 1558716845

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 *865 3RD AVE STE 101 CHULA VISTA, CA 91911*

 *Phone: (619) 426-7910*

Fax: (619) 426-2337

 *After Hours Phone: (619) 426-7910*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 482034

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No

 *855 3RD AVE STE 2200 CHULA VISTA, CA 91911*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 482034

Provider Gender: Female

License Number: A82912

NPI: 1790772572

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

D2. 初級保健名錄


Cultural Competency: N


Hospital Affiliation:

*GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CORONADO HOSP
AND HEALTHCARE CTR*

Board Certified Specialty: No

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

JACOBS-KLEISLI, MILAGROS

Provider ID: 467596

Provider Gender: Female

NPI: 1811221641

 *Provider English Spoken: Y*

Cultural Competency: N


Hospital Affiliation:

*GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, HUNTINGTON
MEMORIAL HOSPITAL, USC
Arcadia Hospital*

Board Certified Specialty: No

 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

 *Phone: (619) 482-3090*

Fax: (619) 482-7350

 *After Hours Phone: (619)*

482-3090

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS


KORSAND, SID

Provider ID: 482034

Provider Gender: Male

License Number: A49591

NPI: 1588634513


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Farsi, Turkish*

Cultural Competency: N

Board Certified Specialty: No

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

KORSAND, SID

Provider ID: 482034

Provider Gender: Male

License Number: A49591

NPI: 1588634513


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Farsi, Turkish*

Cultural Competency: N

Board Certified Specialty: No

 855 3RD AVE STE 2200
CHULA VISTA, CA 91911

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

KORSAND, SID

Provider ID: 634788

Provider Gender: Male

NPI: 1588634513


 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Turkish*

Cultural Competency: N

Board Certified Specialty: No

 280 E ST
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

Fax: (619) 662-4196

 *After Hours Phone: (619)
662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

PEDIATRICS

MCPMAHON, SHARON

Provider ID: 648721

Provider Gender: Female

NPI: 1487279246

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

865 THIRD AVESTE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

MISTRY, CHETAN

Provider ID: 86439

Provider Gender: Male

NPI: 1467505834

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

2440 FENTON ST STE 100

CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232

Provider Gender: Female

NPI: 1144238098

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

769 MEDICAL CENTER CT

STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001

Provider Gender: Female

NPI: 1144238098

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

865 3RD AVE STE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

After Hours Phone: (619)

426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, TRUC

Provider ID: 78518

Provider Gender: Female

NPI: 1881884054

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

WASHINGTON HOSPITAL,

SCRIPPS MERCY HOSPITAL

D2. 初級保健名錄

Board Certified Specialty: No

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

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662-4100

Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

251 LANDIS AVE

D2. 初級保健名錄

CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
📞 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SANTIAGO, ROXANE

Provider ID: 269279
Provider Gender: Female
NPI: 1033461801
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
📍 865 3RD AVE STE 101
CHULA VISTA, CA 91911
☎ Phone: (619) 426-7910
📠 Fax: (619) 426-2337
📞 After Hours Phone: (619) 426-7910
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322
Provider Gender: Male
License Number: A45942
NPI: 1396812236
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Gujarati, Hindi, Urdu

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322
Provider Gender: Male

NPI: 1396812236

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Gujarati, Hindi, Urdu

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104059
Provider Gender: Female
NPI: 1275541625
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN

D2. 初級保健名錄

DIEGO, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

1741 EASTLAKE PKWY STE
107

CHULA VISTA, CA 91915

Phone: (619) 482-1700

Fax: (619) 475-4578

After Hours Phone: (619)
482-1700

Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

YAO, CATHERINE

Provider ID: 371204

Provider Gender: Female

NPI: 1801166442

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
License Number: PA61683
NPI: 1215477765

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZARGAR, SHABNAM

Provider ID: 371075

Provider Gender: Female

NPI: 1417256074

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org


Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): License Number: PA54404
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



PHYSICIANS ASSISTANT **INDA, PRISCILLA**

Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT **INDA, PRISCILLA**

Provider ID: 427322

Provider Gender: Female


NPI: 1679008379
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


PHYSICIANS ASSISTANT **MENDEZ, JESUS**

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT **MENDEZ, JESUS**



Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT **QUICK, ELISABETH**

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


D2. 初級保健名錄

Cultural Competency: N


Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT


QUICK, ELISABETH

Provider ID: 206355

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT


REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306


NPI: 1548455405

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PHYSICIANS ASSISTANT


REVELES, DIANA

Provider ID: 417641

Provider Gender: Female

License Number: PA19306


NPI: 1548455405

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 352 L ST

CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619)
515-2325

 Website: www.fhcsd.org


Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PODIATRIST

MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/
/clinics/chula-
vista-
medic-
al-
plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PODIATRIST

MANCHEL, BRUCE






Provider ID: 427322


D2. 初級保健名錄

Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST


SCHNEIDER, SARAH



Provider ID: 206355
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE **QUILALANG, SUSAN**

Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED

D2. 初級保健名錄

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female



License Number: NP5579


NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female



License Number: RN371480


NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male



License Number: PT37189


NPI: 1437445566

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male



License Number: PT37189


NPI: 1437445566

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173



NPI: 1497236384


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

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 Phone: (619) 515-2500

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 251 LANDIS AVE

D2. 初級保健名錄

CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
🕒 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 206355
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 251 LANDIS AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
🕒 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 206355
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 251 LANDIS AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
🕒 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA

Provider ID: 206355
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 251 LANDIS AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
🕒 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

RODRIGUEZ, CASSANDRA



Provider ID: 206355
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 251 LANDIS AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 515-2500
🕒 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

RHEUMATOLOGY

REDDY, DANA


Provider ID: 427322
Provider Gender: Female
License Number: A115598
NPI: 1144538778





D2. 初級保健名錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

RHEUMATOLOGY


REDDY, DANA

Provider ID: 427322
Provider Gender: Female
License Number: A115598
NPI: 1144538778
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

SPEECH PATHOLOGIST

CABADING, DOREEN

Provider ID: 427322
Provider Gender: Female
License Number: SP18192
NPI: 1043507585
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

SPEECH PATHOLOGIST



CABADING, DOREEN

Provider ID: 427322
Provider Gender: Female
License Number: SP18192
NPI: 1043507585
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 678 3RD AVE
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA



Provider ID: 569910
Provider Gender: Female
License Number: C52581
NPI: 1053300251
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No

D2. 初級保健名錄

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910
Provider Gender: Female
License Number: C52581
NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No





 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER


Provider ID: 418340
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE


PRACTITIONER

BELEN, NEZER

Provider ID: 418340
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes



Min/Max Age: 0\150






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN


Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM







CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
 Provider English Spoken: Y

D2. 初級保健名錄

 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:00PM



CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)
515-2498*
 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT*



PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

GARCIA, JOHNNY
Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No




 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N

Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA
Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER **HARPEL, SHERYL**

D2. 初級保健名錄

Provider ID: 569910

Provider Gender: Female


License Number: NP95009329


NPI: 1780177147


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL

Provider ID: 569910

Provider Gender: Female


License Number: NP95009329


NPI: 1780177147

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HETTIG, JUDITH

Provider ID: 418340

Provider Gender: Female

License Number: NP3439


NPI: 1396815866


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HETTIG, JUDITH

Provider ID: 418340

Provider Gender: Female

License Number: NP3439


NPI: 1396815866


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
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 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910

Provider Gender: Female

License Number: NP95023148

NPI: 1184389934


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910

Provider Gender: Female

License Number: NP95023148

NPI: 1184389934

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501

Provider Gender: Female


License Number: NP4430


NPI: 1346437464

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

g
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 418501

Provider Gender: Female


License Number: NP4430


NPI: 1346437464

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991


 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

g
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185267

Provider Gender: Female


License Number: NP4430


NPI: 1346437464

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185267

Provider Gender: Female


License Number: NP4430


NPI: 1346437464


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340

Provider Gender: Female

License Number: NP95000205


NPI: 1063835692


Provider English Spoken: Y
 Provider Language(s)
Spoken: Amharic, Arabic

Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020


 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

D2. 初級保健名錄

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**


ODA, THAGHAR


Provider ID: 418340

Provider Gender: Female

License Number: RN810863

NPI: 1063835692


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**


ODA, THAGHAR


Provider ID: 418340

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**


ODA, THAGHAR


Provider ID: 418340

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**

OLVERA, LUISA

Provider ID: 478971

Provider Gender: Female

License Number: NP95001710

NPI: 1598161309

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A


Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:00AM-8:00PM

CERTIFIED NURSE **PRACTITIONER**

OLVERA, LUISA


Provider ID: 478971

Provider Gender: Female

License Number: NP95001710


NPI: 1598161309

D2. 初級保健名錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404
 Website: N/A
Email:

iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM




CERTIFIED NURSE


PRACTITIONER

REAL, MARIA


Provider ID: 185267
Provider Gender: Female
License Number: NP17328
NPI: 1548450471

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)

312-0347
 Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE


PRACTITIONER

REAL, MARIA


Provider ID: 185267
Provider Gender: Female
License Number: NP17328
NPI: 1548450471

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

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N


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PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


CERTIFIED NURSE


PRACTITIONER

REGEV, SHANEE

Provider ID: 569910
Provider Gender: Female
License Number: NP95022460
NPI: 1477218121

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER



CERTIFIED NURSE

PRACTITIONER


REGEV, SHANEE

Provider ID: 569910
Provider Gender: Female
License Number: NP95022460
NPI: 1477218121

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100

D2. 初級保健名錄

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER





REID, EMILY

Provider ID: 185267
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619) 312-0347

 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER






REID, EMILY



Provider ID: 185267
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER






SMITH, SHARON



Provider ID: 418340
Provider Gender: Female
License Number: NP15444
NPI: 1780603597
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340
Provider Gender: Female
License Number: RN428876
NPI: 1780603597
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

SMITH, SHARON

Provider ID: 418340
Provider Gender: Female
License Number: RN428876

D2. 初級保健名錄

NPI: 1780603597

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

 Provider English Spoken: Y


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Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ,


AURORA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ,

AURORA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961


NPI: 1932452323

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

VILLANUEVA DE GUTIE,

BERENICE

Provider ID: 185267

Provider Gender: Female


License Number: NP95002188

NPI: 1952795536


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org





D2. 初級保健名錄

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE




Provider ID: 185267
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.or


g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, BREAHA
Provider ID: 185267
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.or

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


CERTIFIED NURSE

PRACTITIONER

WILLIAMS, BREAHA
Provider ID: 185267
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206354

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206354

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE

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 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

D2. 初級保健名錄

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 525 E MAIN ST
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🕒 After Hours Phone: (619)
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🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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♿ Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

UY, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

UY, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Board Certified Specialty: No

📍 525 E MAIN ST
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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 418340

Provider Gender: Female

License Number: A146838

NPI: 1720474141

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020

☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI


Provider ID: 418340

Provider Gender: Female

License Number: A146838


NPI: 1720474141


D2. 初級保健名錄

 Provider English Spoken: Y Hours: M-F 8:30AM-5:30PM
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


AL ANI, NAJWAN

Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


AL ANI, NAJWAN

Provider ID: 418340

Provider Gender: Female

License Number: A144974

NPI: 1275948473

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female

License Number: A167529


NPI: 1316310840


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female


License Number: A167529


NPI: 1316310840

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

D2. 初級保健名錄

EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340
Provider Gender: Male
License Number: A186694
NPI: 1447888284
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 525 E MAIN ST
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☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL
Provider ID: 418340
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL
Provider ID: 418340
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 525 E MAIN ST
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☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619) 515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS

Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DOMINGUEZ, DENNIS






Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811


D2. 初級保健名錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE







GHAFARI, DAUOD


Provider ID: 478971
Provider Gender: Male
License Number: A98486
NPI: 1053417691
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Board Certified Specialty: No
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


GHAFARI, DAUOD






Provider ID: 478971
Provider Gender: Male
License Number: A98486
NPI: 1053417691
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Board Certified Specialty: No
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 401-0404
 After Hours Phone: (619)
401-0404
 Website: N/A
Email:

iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340
Provider Gender: Male
License Number: A83390
NPI: 1477711521
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340
Provider Gender: Male
License Number: A83390
NPI: 1477711521
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HASTANAN, CAROL

Provider ID: 206354

D2. 初級保健名錄

Provider Gender: Female


License Number: A110192


NPI: 1861648461

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499


 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female


License Number: A110192


NPI: 1861648461

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499


 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male


License Number: A177445


NPI: 1922619766


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male


License Number: A177445


NPI: 1922619766

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KASAWA, JOHN

Provider ID: 569910


Provider Gender: Male

License Number: A79338

NPI: 1134230329

 Provider English Spoken: Y







D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Arabic, Spanish
Cultural Competency: N
Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*







FAMILY PRACTICE

LIN, SHUANG

Provider ID: 206354
Provider Gender: Female
License Number: A138887
NPI: 1689093684
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM






FAMILY PRACTICE

LIN, SHUANG



Provider ID: 206354
Provider Gender: Female
License Number: A138887
NPI: 1689093684
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

NASSIR, BASSAM


Provider ID: 569910
Provider Gender: Male
License Number: A101888
NPI: 1386848166
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

662-4100

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910
Provider Gender: Male
License Number: A101888
NPI: 1386848166
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PUTRUS, RAMIZ


Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534


D2. 初級保健名錄

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267

Provider Gender: Male


License Number: A68184


NPI: 1144300534

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

RONQUILLO, KAREN AN


Provider ID: 658684


Provider Gender: Female


NPI: 1275160012

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 855 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 440-2751

 Fax: (858) 633-4692

 After Hours Phone: (619)
440-2751

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male


License Number: A158364


NPI: 1245401298

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male


License Number: A158364


NPI: 1245401298

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991



 After Hours Phone: (619)

D2. 初級保健名錄

795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No


 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD



Provider ID: 185267
Provider Gender: Male
License Number: 20A6433

NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org
g
Email:


aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No


 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FQHC

CENTRO MEDICO EL CAJON,
Provider ID: 478971
NPI: 1154480069

 Provider English Spoken: Y
Cultural Competency: N
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)
873-8940
 Website: N/A
Email:

iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-8:00PM

FQHC

CENTRO MEDICO EL CAJON,
Provider ID: 478971
NPI: 1154480069

 Provider English Spoken: Y
Cultural Competency: N
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 873-8940
Fax: (619) 401-0522
 After Hours Phone: (619)

D2. 初級保健名錄

873-8940
Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

Provider English Spoken: Y
Cultural Competency: N

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

Fax: (619) 593-7164

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

Provider English Spoken: Y
Cultural Competency: N

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

Fax: (619) 593-7164

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org

Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198

Provider English Spoken: Y
Cultural Competency: N

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

Fax: (619) 269-0191

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janelle@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198

Provider English Spoken: Y
Cultural Competency: N

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

Fax: (619) 269-0191

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janelle@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501

NPI: 1134590086

Provider English Spoken: Y
Cultural Competency: N

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄


Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC EL CAJON BROADWAY,


Provider ID: 418501

NPI: 1134590086

 Provider English Spoken: Y

Cultural Competency: N

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267


NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

Fax: (619) 749-5480

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267

NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

Fax: (619) 749-5480

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM


TH-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH EL CAJON,


Provider ID: 569910

NPI: 1568845741

 Provider English Spoken: Y

Cultural Competency: N

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910

NPI: 1568845741

 Provider English Spoken: Y
Cultural Competency: N

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

HEPATOLOGY

GISH, ROBERT


Provider ID: 185267


Provider Gender: Male

D2. 初級保健名錄

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: LOMA


LINDA UNIVERSITY COMM


MED CTR

Board Certified Specialty: No

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

HEPATOLOGY


GISH, ROBERT

Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N

Hospital Affiliation: LOMA


LINDA UNIVERSITY COMM


MED CTR

Board Certified Specialty: No

 165 S 1ST ST

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 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971

Provider Gender: Male

License Number: A151547

NPI: 1134513211


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971

Provider Gender: Male

License Number: A151547

NPI: 1134513211


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:


iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 569910

Provider Gender: Male

License Number: 20A18702

NPI: 1164795498

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100




D2. 初級保健名錄

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


AWDISHO, ALAN






Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE





CARPENTER, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




INTERNAL MEDICINE

CARPENTER, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER







INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female
License Number: A127798
NPI: 1629339304
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female
License Number: A127798
NPI: 1629339304
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org

D2. 初級保健名錄

Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
📞 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
📞 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL

CHULA VISTA
Board Certified Specialty: No
📍 1032 BROADWAY
EL CAJON, CA 92021
☎ Phone: (619) 795-5991
📞 After Hours Phone: (619)
795-5991
🌐 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
📍 1032 BROADWAY

D2. 初級保健名錄

EL CAJON, CA 92021
☎ Phone: (619) 795-5991
🕒 After Hours Phone: (619) 795-5991
🌐 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910
Provider Gender: Female
License Number: A164238
NPI: 1396277737
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910
Provider Gender: Female
License Number: A164238
NPI: 1396277737

☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910
Provider Gender: Male
License Number: A138568
NPI: 1720497514
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910
Provider Gender: Male
License Number: A138568
NPI: 1720497514
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MICHAEL, RAMI



Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020

D2. 初級保健名錄

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL



Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NADI, FAHIMA



Provider ID: 418340

Provider Gender: Female
License Number: A175325
NPI: 1770072290
 Provider English Spoken: Y
 Provider Language(s) Spoken: Pushto
Cultural Competency: N
Board Certified Specialty: No


 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

NADI, FAHIMA



Provider ID: 418340
Provider Gender: Female
License Number: A175325
NPI: 1770072290
 Provider English Spoken: Y
 Provider Language(s) Spoken: Pushto
Cultural Competency: N
Board Certified Specialty: No



 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


NARAYAN, ARCHANA

Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NARAYAN, ARCHANA


Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950
 Provider English Spoken: Y


D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Hindi, Kannada
Cultural Competency: N
*Hospital Affiliation: PALOMAR
MEDICAL CENTER*

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*


 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


PARIKH, MILIND


Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 *Provider English Spoken: Y*


 *Provider Language(s)*
*Spoken: Gujarati, Hindi,
Spanish*


Cultural Competency: N

*Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout*

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


PARIKH, MILIND


Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406


 *Provider English Spoken: Y*


 *Provider Language(s)*
*Spoken: Gujarati, Hindi,
Spanish*


Cultural Competency: N

*Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout*

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619)
515-2498*


 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

PETITT, JOHN


Provider ID: 478971

Provider Gender: Male

License Number: G52812

NPI: 1497992432


 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 *Phone: (619) 401-0404*

 *After Hours Phone: (619)
401-0404*

 *Website: N/A*

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

PETITT, JOHN

Provider ID: 478971

Provider Gender: Male

License Number: G52812

NPI: 1497992432


 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 *Phone: (619) 401-0404*

 *After Hours Phone: (619)
401-0404*

 *Website: N/A*

Email:

iselaocha@borregohealth.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN

Provider ID: 428134

Provider Gender: Male

NPI: 1730132457

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 5442 SYCUAN RD
EL CAJON, CA 92019

 Phone: (619) 445-0707

Fax: (619) 445-0988


 After Hours Phone: (619)
445-0707

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:00PM

INTERNAL MEDICINE

ROUEL, LINDA

Provider ID: 308485

Provider Gender: Female

NPI: 1326128950

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Mandarin,
Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 860 JAMACHA RD STE 107
EL CAJON, CA 92019

 Phone: (619) 456-9920

Fax: (619) 456-9340

 After Hours Phone: (619)
456-9920

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-7:00PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT


HOSPITAL

Board Certified Specialty: No

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

D2. 初級保健名錄

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 418501

N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE

ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT


HOSPITAL


Board Certified Specialty: No

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983


 Website: *www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT


HOSPITAL

Board Certified Specialty: No

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: *www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


SHEIKH-MOHAMED, HALA

Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Hindi, Urdu

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: *www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA


Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Hindi, Urdu

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: *www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON

Provider ID: 569910

Provider Gender: Male

License Number: C144411

NPI: 1790744795

Provider English Spoken: Y

Provider Language(s)
Spoken: Armenian, Hebrew

Cultural Competency: N


Hospital Affiliation: NORTH


BAY VACAVALLEY HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

TCHAKMAKJIAN, LEVON

Provider ID: 569910

Provider Gender: Male

License Number: C144411

NPI: 1790744795

Provider English Spoken: Y

Provider Language(s)
Spoken: Armenian, Hebrew

Cultural Competency: N


Hospital Affiliation: NORTH


BAY VACAVALLEY HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ZAYED, AHMAD

Provider ID: 478971

Provider Gender: Male

License Number: A169713

NPI: 1720500929

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chinese,
Mandarin, Persian, Tagalog

Cultural Competency: N

Hospital Affiliation: RIVERSIDE


COMMUNITY HOSP


Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 401-0404

 After Hours Phone: (619)
401-0404

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-8:00PM

INTERNAL MEDICINE

ZAYED, AHMAD

Provider ID: 478971

Provider Gender: Male

License Number: A169713

NPI: 1720500929

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chinese,
Mandarin, Persian, Tagalog

Cultural Competency: N

Hospital Affiliation: RIVERSIDE


COMMUNITY HOSP


Board Certified Specialty: No

 133 W MAIN ST STE 100

EL CAJON, CA 92020

 Phone: (619) 401-0404

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401-0404

 Website: N/A

Email:


iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-8:00PM

INTERVENTIONAL

CARDIOLOGY

KAFRI, HASSAN

Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, German,

D2. 初級保健名錄

Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN
Provider ID: 569910
Provider Gender: Male
License Number: A96002
NPI: 1730258401
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, German,
Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA

VISTA MED CTR
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERVENTIONAL CARDIOLOGY


MOUSSAVIAN, MEHRAN
Provider ID: 418340
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRI
CITY MEDICAL CTR, SHARP
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
MEMORIAL HOSPITAL,
Adventist Health and Rideout
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 418340
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRI
CITY MEDICAL CTR, SHARP
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
MEMORIAL HOSPITAL,
Adventist Health and Rideout
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498

D2. 初級保健名錄

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

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 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

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 Phone: (619) 515-2498

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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 478971

Provider Gender: Male

License Number: A113241

NPI: 1508046376

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

 Website: N/A


Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 478971

Provider Gender: Male

License Number: A113241

NPI: 1508046376

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,

Sharp Grossmont Hospital

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 418340

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 418340

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

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515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN


Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

D2. 初級保健名錄

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HO, MYLIEN

Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

 After Hours Phone: (619)
873-8940

 Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HO, MYLIEN

Provider ID: 478971

Provider Gender: Female

License Number: A48215

NPI: 1851464606

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020

 Phone: (619) 873-8940

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 Website: N/A


Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider ID: 418501

Provider Gender: Female

License Number: G50634


NPI: 1285687350


Provider English Spoken: Y


Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider ID: 418501

D2. 初級保健名錄

Provider Gender: Female

License Number: G50634

NPI: 1285687350

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

1032 BROADWAY

EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

525 E MAIN ST

EL CAJON, CA 92020

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Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON


Provider ID: 418340

Provider Gender: Female

License Number: A116680

D2. 初級保健名錄

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL


Provider ID: 418340

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL


Provider ID: 418340

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
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N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, KERN


MEDICAL CENTER

Board Certified Specialty: No

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, KERN

MEDICAL CENTER

Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

133 W MAIN ST STE 100
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Website: N/A

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 478971

Provider Gender: Male

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Hospital Affiliation:

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Email:

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 418340

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

525 E MAIN ST
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Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

D2. 初級保健名錄

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 418340

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

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 After Hours Phone: (619)
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 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital


Board Certified Specialty: No

D2. 初級保健名錄

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

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 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL): **ZIEG, ALAN**
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

 525 E MAIN ST
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 Phone: (619) 515-2498
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 525 E MAIN ST
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 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 418340

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,

D2. 初級保健名錄

SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

📍 525 E MAIN ST

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 525 E MAIN ST

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340

Provider Gender: Male

License Number: A107093

NPI: 1588825129

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

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American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910

Provider Gender: Male

License Number: A131365

NPI: 1609171982

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER

Board Certified Specialty: No

📍 875 EL CAJON BLVD

EL CAJON, CA 92020

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910

Provider Gender: Male

License Number: A131365

NPI: 1609171982

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER

Board Certified Specialty: No

📍 875 EL CAJON BLVD

EL CAJON, CA 92020

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)

D2. 初級保健名錄

662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910

Provider Gender: Female

License Number: A40473

NPI: 1023061314

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic, Faroese,
Farsi, Persian, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910

Provider Gender: Female

License Number: A40473

NPI: 1023061314

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic, Faroese,
Farsi, Persian, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

Provider Language(s)


Spoken: Arabic, Farsi,


French, Greek, Italian,
Spanish


Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIU, GEORGIOS

Provider ID: 569910

Provider Gender: Male

License Number: A127706

NPI: 1790054393

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL



Board Certified Specialty: No

D2. 初級保健名錄

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO



Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER

OPHTHALMOLOGY



PONS, MAURICIO

Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish



Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY



SKAF, AYHAM

Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100






D2. 初級保健名錄

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Board Certified Specialty: No


 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA




Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 初級保健名錄

<p><i>PROVIDER</i></p> <p><u>PEDIATRICS</u> CONE, STEPHANIE Provider ID: 418501 Provider Gender: Female License Number: A123929 NPI: 1437444858</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO Board Certified Specialty: No</p> <p><input type="checkbox"/> 1032 BROADWAY EL CAJON, CA 92021 <input type="phone"/> Phone: (619) 795-5991 <input type="radio"/> After Hours Phone: (619) 795-5991 <input type="globe"/> Website: www.lamaestra.org</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM</p> <p><u>PEDIATRICS</u> CONE, STEPHANIE Provider ID: 418501 Provider Gender: Female License Number: A123929 NPI: 1437444858</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s)</p>	<p>Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO Board Certified Specialty: No</p> <p><input type="checkbox"/> 1032 BROADWAY EL CAJON, CA 92021 <input type="phone"/> Phone: (619) 795-5991 <input type="radio"/> After Hours Phone: (619) 795-5991 <input type="globe"/> Website: www.lamaestra.org</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM</p> <p><u>PEDIATRICS</u> FIGUEROA RODRIGUEZ, BRENDA Provider ID: 478971 Provider Gender: Female License Number: A114674 NPI: 1134205214</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p><input type="checkbox"/> 133 W MAIN ST STE 100 EL CAJON, CA 92020 <input type="phone"/> Phone: (619) 873-8940 <input type="radio"/> After Hours Phone: (619) 873-8940 <input type="globe"/> Website: N/A</p> <p>Email: iselaochoa@borregohealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u> FLEMING, TARA Provider ID: 418340 Provider Gender: Female License Number: A152462 NPI: 1972965242</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p>	<p>Min/Max Age: 0\999 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u> FIGUEROA RODRIGUEZ, BRENDA Provider ID: 478971 Provider Gender: Female License Number: A114674 NPI: 1134205214</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p><input type="checkbox"/> 133 W MAIN ST STE 100 EL CAJON, CA 92020 <input type="phone"/> Phone: (619) 873-8940 <input type="radio"/> After Hours Phone: (619) 873-8940 <input type="globe"/> Website: N/A</p> <p>Email: iselaochoa@borregohealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u> FLEMING, TARA Provider ID: 418340 Provider Gender: Female License Number: A152462 NPI: 1972965242</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL</p>
--	--	--

D2. 初級保健名錄

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

NPI: 1972965242

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

HOANG, VY

Provider ID: 546310

Provider Gender: Female

NPI: 1649575135

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND
NEWBORNS, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

📍 844 JACKMAN ST
EL CAJON, CA 92020
☎ Phone: (619) 442-2560
Fax: (619) 442-7836

🕒 After Hours Phone: (619)
442-2560

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

🗨 Provider English Spoken: Y
Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619)
515-2498

🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

🗨 Provider English Spoken: Y
Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:
MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
🕒 After Hours Phone: (619)

D2. 初級保健名錄

515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS


KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353


 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS


NAGNUR, PRITI


Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Hindi, Kannada


Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

NAGNUR, PRITI


Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Kannada


Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org


Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


NAIK, SHILPA

Provider ID: 546498

Provider Gender: Female

NPI: 1902156904

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, Sharp Grossmont

Hospital

Board Certified Specialty: No

 844 JACKMAN ST

D2. 初級保健名錄

EL CAJON, CA 92020
☎ Phone: (619) 442-2560
Fax: (619) 442-7836
🕒 After Hours Phone: (619) 442-2560
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, VI

Provider ID: 546509
Provider Gender: Female
NPI: 1053540534
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
📍 844 JACKMAN ST
EL CAJON, CA 92020
☎ Phone: (619) 442-2560
Fax: (619) 442-7836
🕒 After Hours Phone: (619) 442-2560
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PINTO, ANITA

Provider ID: 546215
Provider Gender: Female
NPI: 1477663722
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
📍 844 JACKMAN ST
EL CAJON, CA 92020
☎ Phone: (619) 442-2560
Fax: (619) 442-7836
🕒 After Hours Phone: (619) 442-2560
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910
Provider Gender: Male
License Number: A134995
NPI: 1508209651
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Portuguese,

Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910
Provider Gender: Male
License Number: A134995
NPI: 1508209651
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄


N





 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


ALYAS, ALISIA

Provider ID: 418501
Provider Gender: Female
License Number: PA58466
NPI: 1437768017

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
 *After Hours Phone: (619) 795-5991*
 *Website: www.lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM


PHYSICIANS ASSISTANT

ALYAS, ALISIA


Provider ID: 418501
Provider Gender: Female
License Number: PA58466
NPI: 1437768017

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*

 *After Hours Phone: (619) 795-5991*
 *Website: www.lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA


Provider ID: 185267
Provider Gender: Female
License Number: PA58466
NPI: 1437768017

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267
Provider Gender: Female


License Number: PA58466
NPI: 1437768017

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

Email: aschmaltz@lamaestra.org

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267
Provider Gender: Male
License Number: PA13694
NPI: 1346382611

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No


 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT


ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT



MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No

 165 S 1ST ST
EL CAJON, CA 92019
 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No

 165 S 1ST ST
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 *Phone: (619) 312-0347*
 *After Hours Phone: (619) 312-0347*
 *Website: www.lamaestra.org*

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT



MERCER, KELLY

Provider ID: 418501

Provider Gender: Female





License Number: PA21625

NPI: 1154609790

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No


 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
 *After Hours Phone: (619) 795-5991*
 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 418501


Provider Gender: Female

License Number: PA21625

NPI: 1154609790

 *Provider English Spoken: Y*

D2. 初級保健名錄

 *Provider Language(s) Spoken: Arabic*
Cultural Competency: N
Board Certified Specialty: No
 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5991*
 *After Hours Phone: (619) 795-5991*
 *Website: www.lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT







ROSENBLATT, SHERI

Provider ID: 569910
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM





PHYSICIANS ASSISTANT

ROSENBLATT, SHERI

Provider ID: 569910
Provider Gender: Female
License Number: PA22872
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Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
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 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT








TURNER, SHEREENA

Provider ID: 418340
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*
 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

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Provider ID: 418340
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License Number: PA20396
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 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
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Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ZAMBRANA, GEORGE





Provider ID: 478971


D2. 初級保健名錄

Provider Gender: Male
License Number: PA16673
NPI: 1104836659
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619)
873-8940
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM

PHYSICIANS ASSISTANT



ZAMBRANA, GEORGE





Provider ID: 478971
Provider Gender: Male
License Number: PA16673
NPI: 1104836659
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 133 W MAIN ST STE 100
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 Phone: (619) 873-8940
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873-8940
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-8:00PM

PODIATRIST



CHARP, KENNETH





Provider ID: 478971
Provider Gender: Male
License Number: DPM1536
NPI: 1841384203
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619)
873-8940
 Website: N/A
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

D2. 初級保健名錄

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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515-2400

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Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No

 525 E MAIN ST

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Email: janellek@fhcsd.org

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

REGISTERED PHYSICAL

THERAPIST

CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST

D2. 初級保健名錄

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910
Provider Gender: Female
License Number: PT40025
NPI: 1952982761
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

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Provider ID: 569910

Provider Gender: Female
License Number: PT40025
NPI: 1952982761
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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EL CAJON, CA 92020
Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

GUTIERREZ, JUSTINE

Provider ID: 418340
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
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Cultural Competency: N
Board Certified Specialty: No
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

KUIOKA, TROY

Provider ID: 569910
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020

D2. 初級保健名錄

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


REGISTERED PHYSICAL THERAPIST



KUIOKA, TROY


Provider ID: 569910
Provider Gender: Male
License Number: PT42665
NPI: 1912640053

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID



Provider ID: 418340
Provider Gender: Male


License Number: PT293536
NPI: 1043736879

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
EL CAJON, CA 92020


 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST



MIGNEA, DAVID


Provider ID: 418340
Provider Gender: Male
License Number: PT293536
NPI: 1043736879

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 525 E MAIN ST
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 Phone: (619) 515-2300
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 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

ENCINITAS

CERTIFIED NURSE

PRACTITIONER



MACIAS, ALISSA


Provider ID: 480243
Provider Gender: Female
License Number: NP21368
NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA



Provider ID: 480243
Provider Gender: Female
License Number: NP21368
NPI: 1952658445


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

D2. 初級保健名錄

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


MACIAS, ALISSA




Provider ID: 480243


Provider Gender: Female


License Number: NP21368

NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


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Provider ID: 480243



Provider Gender: Female


License Number: NP21368

NPI: 1952658445

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Cultural Competency: N
Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR



LOVERN, JENNIFER

Provider ID: 480243

Provider Gender: Female



License Number: DC29074


NPI: 1235469396

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

CHIROPRACTOR



LOVERN, JENNIFER

Provider ID: 480243

Provider Gender: Female



License Number: DC29074


NPI: 1235469396

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N


Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767
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 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM
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CHIROPRACTOR



LOVERN, JENNIFER

Provider ID: 480243

Provider Gender: Female



License Number: DC29074

NPI: 1235469396



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 Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767



D2. 初級保健名錄




 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM



CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 480243
Provider Gender: Female
License Number: DC29074
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 Provider English Spoken: Y
 Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No






 1130 2ND ST
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736-6767



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Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 480243
Provider Gender: Male
License Number: C54157

NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
 After Hours Phone: (760)
753-7842



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 480243
Provider Gender: Male
License Number: C54157
NPI: 1275630618

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
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 Website: N/A
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Min/Max Age: 0\150
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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 480243
Provider Gender: Male
License Number: C54157
NPI: 1275630618







 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
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Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
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FAMILY PRACTICE

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Cultural Competency: N
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
 After Hours Phone: (760)
753-7842
 Website: N/A

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562


NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 753-7842

 After Hours Phone: (760)
753-7842


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562


NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 753-7842

 After Hours Phone: (760)
753-7842

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562


NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 753-7842

 After Hours Phone: (760)
753-7842

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 480243

Provider Gender: Female

License Number: A116562


NPI: 1659563641

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 753-7842

 After Hours Phone: (760)
753-7842

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN


Provider ID: 480243

Provider Gender: Male

License Number: 20A17306


NPI: 1790133767

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Portuguese


Cultural Competency: N


Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (707) 736-6767

 After Hours Phone: (707)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

PROVIDER

Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 480243
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (707) 736-6767
 After Hours Phone: (707)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 480243
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (707) 736-6767
 After Hours Phone: (707)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE

WILLIE, KADEN






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Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (707) 736-6767
 After Hours Phone: (707)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM






FQHC

TRUECARE,

Provider ID: 480243
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
Fax: (760) 736-8740
 After Hours Phone: (760)
753-7842
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

FQHC

TRUECARE,

Provider ID: 480243
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
Fax: (760) 736-8740
 After Hours Phone: (760)
753-7842
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 480243

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 1130 2ND ST

ENCINITAS, CA 92024

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:30AM-5:30PM

PEDIATRICS

BRION, SONJA

Provider ID: 386639

Provider Gender: Female

NPI: 1306817317

Provider English Spoken: Y

Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511
Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CLEMENTINO, NANCY

Provider ID: 386643

Provider Gender: Female

NPI: 1619948619

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Board Certified Specialty: No

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MENDENHALL, ANNA

Provider ID: 386635

Provider Gender: Female

NPI: 1639140650

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MURPHY, CARMEL

Provider ID: 480243

Provider Gender: Female

License Number: A103940

NPI: 1790824787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

1130 2ND ST
ENCINITAS, CA 92024

Phone: (760) 753-7842

After Hours Phone: (760)
753-7842

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MURPHY, CARMEL

Provider ID: 480243

Provider Gender: Female

License Number: A103940

NPI: 1790824787




Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

D2. 初級保健名錄


Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
 After Hours Phone: (760) 753-7842

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS




MURPHY, CARMEL


Provider ID: 480243
Provider Gender: Female
License Number: A103940
NPI: 1790824787

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
 After Hours Phone: (760) 753-7842



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

PEDIATRICS




MURPHY, CARMEL


Provider ID: 480243
Provider Gender: Female
License Number: A103940
NPI: 1790824787

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 753-7842
 After Hours Phone: (760) 753-7842

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*



PEDIATRICS

TERRY, AMANDA


Provider ID: 386739
Provider Gender: Female
NPI: 1861770885


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

Board Certified Specialty: No

 499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
 Phone: (760) 436-4511
Fax: (760) 436-5106

 After Hours Phone: (760) 436-4511


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

TOLBA, KAMEI






Provider ID: 386624
Provider Gender: Male
NPI: 1144221763

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No


 499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

D2. 初級保健名錄

 Phone: (760) 436-4511
 Fax: (760) 436-5106
 After Hours Phone: (760) 436-4511
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480243
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT






CHISWICK, GARY

Provider ID: 480243
Provider Gender: Male

License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT






CHISWICK, GARY

Provider ID: 480243
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER






PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480243
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
 After Hours Phone: (760)

D2. 初級保健名錄

736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FORSMAN, SHANA

Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

ESCONDIDO

CERTIFIED NURSE

PRACTITIONER

CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760)
737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM





CERTIFIED NURSE

PRACTITIONER

CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025

D2. 初級保健名錄

 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


HACINAS, REYNALDO


Provider ID: 419344
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 767-5051

 After Hours Phone: (760) 767-5051

 Website: N

Email:


iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HACINAS, REYNALDO

Provider ID: 419344

Provider Gender: Male


License Number: NP95003024


NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 767-5051

 After Hours Phone: (760) 767-5051

 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775

Provider Gender: Female


License Number: NP4799

NPI: 1356365365

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

D2. 初級保健名錄

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775

Provider Gender: Female


License Number: NP4799


NPI: 1356365365

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


TODD, MIKAYLA

Provider ID: 588941

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA


Provider ID: 588941

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036


NPI: 1851320337


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036


NPI: 1851320337


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

AVILA, MICHAEL

Provider ID: 206270

Provider Gender: Male

License Number: A159727


NPI: 1962936450


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


AVILA, MICHAEL

Provider ID: 206270


Provider Gender: Male

License Number: A159727


NPI: 1962936450

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


CASTANER, ZALYA

Provider ID: 206270

Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CASTANER, ZALYA

Provider ID: 206270


Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
N

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE




CASTANER, ZALYA


Provider ID: 206271

Provider Gender: Female


License Number: A139490
NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE


CASTANER, ZALYA

Provider ID: 206271




Provider Gender: Female


License Number: A139490

NPI: 1487072179


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271

Provider Gender: Female


License Number: A145349

NPI: 1134513039

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271

Provider Gender: Female


License Number: A145349


NPI: 1134513039

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY

ESCONDIDO, CA 92025
 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

Provider Gender: Female


License Number: C171064


NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

Provider Gender: Female


License Number: C171064


NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female


License Number: A152372


NPI: 1306290143


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

D2. 初級保健名錄

FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

128 N BROADWAY
ESCONDIDO, CA 92025

Phone: (760) 546-2858

After Hours Phone: (760)
546-2858

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

128 N BROADWAY
ESCONDIDO, CA 92025

Phone: (760) 546-2858

After Hours Phone: (760)
546-2858

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y

Provider Language(s)

Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

D2. 初級保健名錄

NPI: 1790912855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760)
737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900

After Hours Phone: (760)
737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 665448

Provider Gender: Female

NPI: 1285256073

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (760) 466-1373
 After Hours Phone: (760)
520-8100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270

Provider Gender: Female

License Number: 20A14292

NPI: 1326458373

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

After Hours Phone: (760)
520-8100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

Provider Gender: Female


License Number: A107557


NPI: 1104022672

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

Provider Gender: Female


License Number: A107557


NPI: 1104022672

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male


License Number: A94128


NPI: 1902921406

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male


License Number: A94128


NPI: 1902921406

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

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520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male


License Number: A94128


NPI: 1902921406

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025


 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406


Provider English Spoken: Y


D2. 初級保健名錄

Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


RAO, USHA


Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Hindi, Spanish*


Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


RAO, USHA


Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Hindi, Spanish*


Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


RASHCOVSKY SCHIFF, KARIN


Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: French*

Cultural Competency: N

*Hospital Affiliation: PALOMAR
MEDICAL CENTER*

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)

520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: French*


Cultural Competency: N

*Hospital Affiliation: PALOMAR
MEDICAL CENTER*

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

RODARTE, GABRIEL



Provider ID: 206266

Provider Gender: Male

License Number: A87906

NPI: 1184649212


D2. 初級保健名錄


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760)
520-8340

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


RODARTE, GABRIEL


Provider ID: 206266

Provider Gender: Male

License Number: A87906

NPI: 1184649212

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340


 After Hours Phone: (760)
520-8340

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SANDHU, BASANT


Provider ID: 206271

Provider Gender: Male

License Number: A140398

NPI: 1265795744

 Provider English Spoken: Y


 Provider Language(s)


Spoken: German, Hindi,
Punjabi, Spanish


Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE


SANDHU, BASANT

Provider ID: 206271

Provider Gender: Male

License Number: A140398

NPI: 1265795744

 Provider English Spoken: Y


 Provider Language(s)


Spoken: German, Hindi,
Punjabi, Spanish

Cultural Competency: N

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHULTZ, JAMES

Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE


INLAND VALLEY HOSPITAL,


SOUTHWEST HEALTHCARE


RANCHO SPRINGS HOSPITAL,


PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi, Greek, Spanish


Cultural Competency: N


Hospital Affiliation:


SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



SCHULTZ, JAMES

Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Greek, Spanish


Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi, Greek, Spanish


Cultural Competency: N


Hospital Affiliation:


SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER
Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TANTOD, KULIN


Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TANTOD, KULIN

D2. 初級保健名錄

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THOMPSON, CHERYL

Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

THOMPSON, CHERYL

Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FQHC


CENTRO MEDICO ESCONDIDO,


Provider ID: 419344

NPI: 1023349883

Provider English Spoken: Y

Cultural Competency: N

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606

 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

FQHC

CENTRO MEDICO ESCONDIDO,


Provider ID: 419344

NPI: 1023349883

Provider English Spoken: Y

Cultural Competency: N

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

Fax: (858) 634-6918

 After Hours Phone: (760)
871-0606

 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

D2. 初級保健名錄

FQHC


ESCONDIDO FAMILY HEALTH CENTER,


Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y
Cultural Competency: N

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

FQHC


ESCONDIDO FAMILY HEALTH CENTER,


Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y
Cultural Competency: N

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD


HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y
Cultural Competency: N

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

NEIGHBORHOOD


HEALTHCARE ESCONDIDO,

Provider ID: 206270


NPI: 1598703647

 Provider English Spoken: Y
Cultural Competency: N

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS


AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

 Provider English Spoken: Y
Cultural Competency: N

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD

HEALTHCARE PEDIATRICS


AND PRENATAL,

Provider ID: 424775

NPI: 1437335353


 Provider English Spoken: Y
Cultural Competency: N

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (360) 462-2747

 After Hours Phone: (760)
690-5900

 Website: N/A

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD


HEALTHCARE PEDS AND PRENATAL,

Provider ID: 206266

NPI: 1265618185

 Provider English Spoken: Y
Cultural Competency: N

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340
Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD


HEALTHCARE PEDS AND PRENATAL,

Provider ID: 206266

NPI: 1265618185


 Provider English Spoken: Y
Cultural Competency: N

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY,

Provider ID: 206271

NPI: 1720264641

 Provider English Spoken: Y
Cultural Competency: N

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900
Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD

HEALTHCARE VALLEY


PARKWAY,

Provider ID: 206271

NPI: 1720264641

 Provider English Spoken: Y
Cultural Competency: N

 728 E VALLEY PKWY
ESCONDIDO, CA 92025


 Phone: (760) 737-6900
Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM

TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

ESCONDIDO FAMILY


MEDICINE,

Provider ID: 588941

NPI: 1801438239

 Provider English Spoken: Y
Cultural Competency: N

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100
Fax: (619) 662-7952

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\120

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

FQHC


SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

 *Provider English Spoken: Y*
Cultural Competency: N

 704 E GRAND AVE
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

Fax: (619) 662-7952

 *After Hours Phone: (619)
662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 128 N BROADWAY
ESCONDIDO, CA 92025

 *Phone: (760) 546-2858*

 *After Hours Phone: (760)
546-2858*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 128 N BROADWAY
ESCONDIDO, CA 92025

 *Phone: (760) 546-2858*

 *After Hours Phone: (760)
546-2858*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS*

*MEMORIAL HOSPITAL
ENCINITAS*

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

CARRERA, JORGE


Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS*

*MEMORIAL HOSPITAL
ENCINITAS*

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 235296

Provider Gender: Female

NPI: 1659305084


Provider English Spoken: Y

Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N


Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

Fax: (360) 462-2745

 *After Hours Phone: (760) 520-8100*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084


Provider English Spoken: Y


Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084


Provider English Spoken: Y


Provider Language(s) Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male


License Number: C53062


NPI: 1679102461

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male


License Number: C53062


NPI: 1679102461

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760) 520-8100*

 *Website: www.ihpsocal.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N





 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775
Provider Gender: Female
License Number: A56054
NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 690-5900*
 *After Hours Phone: (760) 690-5900*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266
Provider Gender: Female
License Number: A56054
NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AGUILAR, EDITA

Provider ID: 206266
Provider Gender: Female
License Number: A56054
NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

AGUILAR, EDITA

Provider ID: 424775
Provider Gender: Female
License Number: A56054

NPI: 1467407411

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 690-5900*
 *After Hours Phone: (760) 690-5900*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*





PEDIATRICS

ALDANA, NANCY

Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
 *After Hours Phone: (760) 520-8340*
 *Website: N/A*
Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\21

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


ALDANA, NANCY

Provider ID: 424775

Provider Gender: Female

License Number: A62467

NPI: 1558371963

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No

 426 N DATE ST ESCONDIDO, CA 92025

 Phone: (760) 520-8340


 After Hours Phone: (760) 520-8340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CHOW, BYRON

Provider ID: 206270

Provider Gender: Male

License Number: A78116

NPI: 1619907607


 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 460 N ELM ST ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CHOW, BYRON

Provider ID: 206270

Provider Gender: Male

License Number: A78116

NPI: 1619907607


 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 460 N ELM ST ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

COHEN, CARA

Provider ID: 661879

Provider Gender: Female

NPI: 1215021274


 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND


Board Certified Specialty: No

 625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

 Phone: (760) 746-2641

 Fax: (760) 740-2178

 After Hours Phone: (760) 746-2641

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


COULLAHAN, JESSICA

D2. 初級保健名錄

Provider ID: 661887

Provider Gender: Female


NPI: 1750579108

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER


Board Certified Specialty: No

 625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

 Phone: (760) 746-2641

Fax: (760) 740-2178


 After Hours Phone: (760)
746-2641

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No



460 N ELM ST
ESCONDIDO, CA 92025



Phone: (760) 520-8100



After Hours Phone: (760)
520-8100



Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No



460 N ELM ST
ESCONDIDO, CA 92025



Phone: (760) 520-8100



After Hours Phone: (760)
520-8100



Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

DOSHI, NEELIMA


Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No



426 N DATE ST
ESCONDIDO, CA 92025



Phone: (760) 690-5900



After Hours Phone: (760)
690-5900




Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


DOSHI, NEELIMA

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No



426 N DATE ST
ESCONDIDO, CA 92025



Phone: (833) 867-4642

Fax: (360) 462-2752

D2. 初級保健名錄

☎ After Hours Phone: (833) 867-4642

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): Cultural Competency: N

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOSHI, NEELIMA

Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

☎ After Hours Phone: (760) 690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

IBRAHIM, MAGED

Provider ID: 419344

Provider Gender: Male

License Number: C141296

NPI: 1306852934

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP

Board Certified Specialty: No

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

☎ After Hours Phone: (760) 871-0606

🌐 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

PEDIATRICS

IBRAHIM, MAGED

Provider ID: 419344

Provider Gender: Male

License Number: C141296

NPI: 1306852934

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP

Board Certified Specialty: No

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

☎ After Hours Phone: (760) 871-0606

🌐 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: SU 8:00AM-0:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-0:00PM

PEDIATRICS

MALEKSHAMRAN, KEYVAN

Provider ID: 419344

Provider Gender: Male

License Number: A94845

NPI: 1952466112

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

📍 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

☎ Phone: (760) 871-0606

☎ After Hours Phone: (760) 871-0606

🌐 Website: N

Email:


iselaocha@borregohealth.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


MALEKSHAMRAN, KEYVAN


Provider ID: 419344

Provider Gender: Male

License Number: A94845

NPI: 1952466112

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR

Board Certified Specialty: No

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

 After Hours Phone: (760)
871-0606

 Website: N

Email:

iselaocha@borregohealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS

SONG, JOYCE

Provider ID: 661892


Provider Gender: Female


NPI: 1417510694

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 746-2641

Fax: (760) 740-2178

 After Hours Phone: (760)
746-2641

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


STRAZICICH, KARLA

Provider ID: 206270

Provider Gender: Female

License Number: A45413

NPI: 1134154958


 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270

Provider Gender: Female

License Number: A45413


NPI: 1134154958


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775

Provider Gender: Female

License Number: G83438


NPI: 1730288747

 Provider English Spoken: Y
Cultural Competency: N



Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760)
690-5900


D2. 初級保健名錄




 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


PEDIATRICS

TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775
Provider Gender: Female
License Number: G83438
NPI: 1730288747

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




PEDIATRICS


THIRUNAGARI, HARRSHA


Provider ID: 419344
Provider Gender: Female
License Number: A64928
NPI: 1447472212

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
RIVERSIDE COMMUNITY
HOSP, Parkview Community
Hospital Medical Center
Board Certified Specialty: No

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
871-0606



 Website: N
Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS

THIRUNAGARI, HARRSHA

Provider ID: 419344
Provider Gender: Female
License Number: A64928
NPI: 1447472212

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
RIVERSIDE COMMUNITY
HOSP, Parkview Community
Hospital Medical Center



Board Certified Specialty: No
 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760)
871-0606
 Website: N

Email:
iselaocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS

ZANDKARIMI, FARIBA

Provider ID: 87737
Provider Gender: Female
NPI: 1356373674

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N
Hospital Affiliation: MERCY
GENERAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA, UCSD
MEDICAL CTR

Board Certified Specialty: No
 240 W MISSION AVE STE A
ESCONDIDO, CA 92025
 Phone: (760) 747-5400
Fax: (760) 747-2286

D2. 初級保健名錄

 After Hours Phone: (760) 747-5400

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male


License Number: PA52347


NPI: 1376936120

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male


License Number: PA52347


NPI: 1376936120

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female


License Number: PA20490


NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female


License Number: PA20490


NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271

Provider Gender: Male

License Number: DPM5260

NPI: 1932548393


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: Providence
St Joseph Hospital

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271

Provider Gender: Male

License Number: DPM5260

NPI: 1932548393

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: Providence

St Joseph Hospital

Board Certified Specialty: No

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FALLBROOK

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommu
nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

D2. 初級保健名錄

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y



Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284



Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST

FALLBROOK, CA 92028


 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male



License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028


 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male


License Number: NP95015717


NPI: 1801497284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

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723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male


License Number: NP95015717


NPI: 1801497284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male


License Number: NP95015717


NPI: 1801497284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
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American Sign Language (ASL):
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PROVIDER

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TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

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Provider ID: 624122

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NPI: 1801497284

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
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 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FAMILY PRACTICE ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026

 Provider English Spoken: Y
Cultural Competency: N



Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

D2. 初級保健名錄

 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
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Min/Max Age: 0\999

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 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAMPELLO, LISA

Provider ID: 624122

Provider Gender: Female


License Number: A145924


NPI: 1477933026

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200


 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

D2. 初級保健名錄


FALLBROOK FAMILY HLTH CTR,

Provider ID: 183910

NPI: 1982756086

 Provider English Spoken: Y
Cultural Competency: N

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

 Website: N/A


Email: a.escobedo@chsica.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC


FALLBROOK FAMILY HLTH CTR,

Provider ID: 183910

NPI: 1982756086

 Provider English Spoken: Y
Cultural Competency: N

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

 Website: N/A

Email: a.escobedo@chsica.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 624122

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM


FQHC

VISTA COMMUNITY CLINIC,





Provider ID: 624122

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N







 321 E ALVARADO ST
FALLBROOK, CA 92028

D2. 初級保健名錄

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM







FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM







FQHC

VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N
 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

PEDIATRICS


DEL RE, AMANDA



Provider ID: 238960
Provider Gender: Female
NPI: 1548499957
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 1107 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-0070
Fax: (760) 451-1499
 After Hours Phone: (760) 451-0070
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM



PEDIATRICS

PAIK, JULIANA

Provider ID: 504522
Provider Gender: Female
NPI: 1528167087
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Board Certified Specialty: No



 1107 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-0070
Fax: (760) 451-1499

 After Hours Phone: (760) 451-0070

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROBINSON, DAISY

Provider ID: 230579
Provider Gender: Female
NPI: 1659389740
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

D2. 初級保健名錄

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)
723-6200

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-4:00PM

PEDIATRICS

VU, WENDY

Provider ID: 183910

Provider Gender: Female

License Number: A169529

NPI: 1508148370

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4770

After Hours Phone: (760)
451-4770

Website: N/A

Email: a.escobedo@chsica.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM
SA 8:00AM-5:00PM

PEDIATRICS

VU, WENDY

Provider ID: 183910

Provider Gender: Female

License Number: A169529

NPI: 1508148370

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4770

After Hours Phone: (760)
451-4770

Website: N/A

Email: a.escobedo@chsica.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM
SA 8:00AM-5:00PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

After Hours Phone: (619)
429-3733

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FQHC


IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

NPI: 1790718351

 *Provider English Spoken: Y*
Cultural Competency: N

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*

Fax: (619) 628-5550


 *After Hours Phone: (619) 429-3733*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC


IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

NPI: 1790718351

 *Provider English Spoken: Y*
Cultural Competency: N

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*

Fax: (619) 628-5550

 *After Hours Phone: (619)*

429-3733

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female


License Number: A66830

NPI: 1780609990

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*

 *After Hours Phone: (619)*

429-3733

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female


License Number: A66830


NPI: 1780609990

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*


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 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678

Provider Gender: Female

License Number: A51447

NPI: 1154409035

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 949 PALM AVE

IMPERIAL BEACH, CA 91932

 *Phone: (619) 429-3733*

 *After Hours Phone: (619) 429-3733*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678

Provider Gender: Female

D2. 初級保健名錄

License Number: A51447
NPI: 1154409035
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
📍 949 PALM AVE
IMPERIAL BEACH, CA 91932
☎ Phone: (619) 429-3733
🕒 After Hours Phone: (619)
429-3733
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN

Provider ID: 537752
Provider Gender: Female
NPI: 1174504757
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
☎ Phone: (858) 459-4351
Fax: (858) 459-4399
🕒 After Hours Phone: (858)
459-4351
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

GANDHI, SHEETAL

Provider ID: 282029
Provider Gender: Female
NPI: 1700858859
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
📍 4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037
☎ Phone: (858) 457-2043
Fax: (858) 457-2092
🕒 After Hours Phone: (858)
457-2043
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HUNTER, WENDY

Provider ID: 377597
Provider Gender: Female
NPI: 1053515551
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
☎ Phone: (858) 459-4351
Fax: (858) 459-4399
🕒 After Hours Phone: (858)
459-4351
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PARSONS, GENEVIEVE

Provider ID: 24122
Provider Gender: Female
NPI: 1699700914
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037
☎ Phone: (858) 459-4351
Fax: (858) 459-4399

D2. 初級保健名錄

☎ After Hours Phone: (858) 459-4351

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PASTORE, SIMONE

Provider ID: 600881

Provider Gender: Female

NPI: 1528588134

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037

☎ Phone: (858) 457-2043

Fax: (858) 457-2092

☎ After Hours Phone: (858)
457-2043

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROBERTS, KENDALL

Provider ID: 48933

Provider Gender: Male

NPI: 1265762033

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

📍 4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037

☎ Phone: (858) 457-2043

Fax: (858) 457-2092

☎ After Hours Phone: (858)
457-2043

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHAH, MEERA

Provider ID: 145167

Provider Gender: Female

NPI: 1720300239

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

📍 4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037

☎ Phone: (858) 457-2043

Fax: (858) 457-2092

☎ After Hours Phone: (858)
457-2043

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TUNG, VIVIAN

Provider ID: 11291

Provider Gender: Female

NPI: 1285665133

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

☎ Phone: (858) 459-4351

Fax: (858) 459-4399

☎ After Hours Phone: (858)
459-4351

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

LA MESA

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

WARD, KATHERINE

Provider ID: 480827


Provider Gender: Female


License Number: NP95017921


NPI: 1477223576


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 Phone: (616) 464-6434

 After Hours Phone: (616) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WARD, KATHERINE

Provider ID: 480827

Provider Gender: Female


License Number: NP95017921


NPI: 1477223576


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 Phone: (616) 464-6434

 After Hours Phone: (616) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PATEL, HEMANSHU

Provider ID: 664660

Provider Gender: Male

NPI: 1255777439

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: VICTOR

VALLEY COMMUNITY HOSP,
BARSTOW COMMUNITY


HOSPITAL, DESERT VALLEY


HOSPITAL, Providence St Mary

Medical Center, VICTOR

VALLEY GLOBAL MED CTR

Board Certified Specialty: No

 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

 Phone: (619) 698-0606

Fax: (619) 332-5149

 After Hours Phone: (619) 698-0606

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

SINGH, RAMENDEEP

Provider ID: 664666

Provider Gender: Female


NPI: 1255777421


 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: DESERT

VALLEY HOSPITAL

Board Certified Specialty: No

 7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

 Phone: (619) 698-0606

Fax: (619) 332-5149

 After Hours Phone: (619) 698-0606

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


LA MESA PEDIATRICS,

Provider ID: 480827


NPI: 1033759311


 Provider English Spoken: Y
Cultural Competency: N

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109

 After Hours Phone: (619) 464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FQHC

LA MESA PEDIATRICS,

D2. 初級保健名錄


Provider ID: 480827

NPI: 1033759311

 Provider English Spoken: Y
Cultural Competency: N

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

Fax: (619) 464-5109


 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


Sharp Grossmont Hospital


Board Certified Specialty: No

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BULLOCH, EDGAR

Provider ID: 480827

Provider Gender: Male

License Number: A113241

NPI: 1508046376

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


Sharp Grossmont Hospital


Board Certified Specialty: No

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

NPI: 1063642312

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 435468

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 451191

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 480827

Provider Gender: Female

License Number: C133872

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 480827

Provider Gender: Female

License Number: C133872

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CLAY, CORRIE

Provider ID: 536652

Provider Gender: Female

NPI: 1437207750

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)

D2. 初級保健名錄

464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648986
Provider Gender: Female
NPI: 1093343105
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

8881 FLETCHER PKWY STE
200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648987
Provider Gender: Female
NPI: 1093343105

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8881 FLETCHER PKWY STE
205
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091
Provider Gender: Female
NPI: 1912193301
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL
Board Certified Specialty: No
8881 FLETCHER PKWY STE
200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
464-6434

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 450501
Provider Gender: Female
NPI: 1912193301
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
8881 FLETCHER PKWY STE
205
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619)
464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IMUS, PAUL

D2. 初級保健名錄

Provider ID: 239590

Provider Gender: Male

NPI: 1104116680

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, GROSSMONT
HOSPITAL

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)
401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)
401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female

NPI: 1538685524

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

6942 UNIVERSITY AVE STE
A

LA MESA, CA 91942

Phone: (619) 698-2184

Fax: (619) 698-2084

After Hours Phone: (619)
698-2184

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359

Provider Gender: Female

NPI: 1407047749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SHORT, RICHARD

Provider ID: 60736

Provider Gender: Male

NPI: 1568552727

Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS

Board Certified Specialty: Yes

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

WARD, KATHERINE

Provider ID: 613887

Provider Gender: Female

NPI: 1477223576

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

WARD, KATHERINE

Provider ID: 613881

Provider Gender: Female

NPI: 1477223576

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

10039 VINE ST
LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

10039 VINE ST
LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

D2. 初級保健名錄

FERRAILOLO, NATALIE

Provider ID: 353843


Provider Gender: Female


License Number: A152372


NPI: 1306290143

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 353843


Provider Gender: Female


License Number: A152372


NPI: 1306290143

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342


NPI: 1851602270


Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 440-2751

 After Hours Phone: (619)
440-2751

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342


NPI: 1851602270


Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (619) 440-2751

 After Hours Phone: (619)
440-2751

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD


HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120

Provider English Spoken: Y
Cultural Competency: N

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

Fax: (360) 462-2744

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,



Provider ID: 353843

NPI: 1932384120

Provider English Spoken: Y

D2. 初級保健名錄

Cultural Competency: N

 10039 VINE ST
LAKESIDE, CA 92040
 Phone: (858) 218-3000
Fax: (360) 462-2744

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


MANNINO, ELIZABETH


Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000


 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


MANNINO, ELIZABETH


Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


MCFARLAND, NATHAN


Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MCFARLAND, NATHAN


Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

 10039 VINE ST
LAKESIDE, CA 92040

 Phone: (858) 218-3000


 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE


Provider ID: 419139

Provider Gender: Female

License Number: NP95009933


NPI: 1831557024


D2. 初級保健名錄

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female


License Number: NP95009933


NPI: 1831557024

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


ARVIZU, PALOMA

Provider ID: 419139

Provider Gender: Female

License Number: NP95008782

NPI: 1689139396


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


ARVIZU, PALOMA


Provider ID: 419139

Provider Gender: Female

License Number: NP95008782

NPI: 1689139396

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON


Provider ID: 419139

Provider Gender: Female

License Number: RN428876

NPI: 1780603597


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

D2. 初級保健名錄


SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: RN428876

NPI: 1780603597


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TOTH, JESSICA

Provider ID: 419139

Provider Gender: Female


License Number: NP95001050


NPI: 1578993788

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


TOTH, JESSICA

Provider ID: 419139

Provider Gender: Female


License Number: NP95001050


NPI: 1578993788


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318

NPI: 1285074740

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

D2. 初級保健名錄

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FQHC

LEMON GROVE FAMILY

HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466

Provider English Spoken: Y
Cultural Competency: N

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FQHC

LEMON GROVE FAMILY

HEALTH CENTER,

Provider ID: 419139

NPI: 1427282466

Provider English Spoken: Y
Cultural Competency: N

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)

515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

GALLARES, DANIEL

Provider ID: 419139

Provider Gender: Male

License Number: A165925

NPI: 1245689488

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAHDAL, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): License Number: A113001

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

 7592 BROADWAY
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 419139

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 419139

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 *7592 BROADWAY*

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 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

 *7592 BROADWAY*

LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

 *7592 BROADWAY*

LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

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515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 *7592 BROADWAY*

LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)
515-2550*

 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 *7592 BROADWAY*

D2. 初級保健名錄

LEMON GROVE, CA 91945
☎ Phone: (619) 515-2550
🕒 After Hours Phone: (619) 515-2550
🌐 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 419139
Provider Gender: Female
License Number: A178499
NPI: 1033613732
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

📍 7592 BROADWAY
LEMON GROVE, CA 91945
☎ Phone: (619) 515-2550
🕒 After Hours Phone: (619) 515-2550
🌐 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 419139
Provider Gender: Female
License Number: A178499
NPI: 1033613732
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

📍 7592 BROADWAY
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☎ Phone: (619) 515-2550
🕒 After Hours Phone: (619) 515-2550
🌐 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 419139
Provider Gender: Female
License Number: A148014
NPI: 1457794752
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
📍 7592 BROADWAY
LEMON GROVE, CA 91945
☎ Phone: (619) 515-2550
🕒 After Hours Phone: (619) 515-2550
🌐 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 419139
Provider Gender: Female
License Number: A148014
NPI: 1457794752
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
📍 7592 BROADWAY
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☎ Phone: (619) 515-2550

D2. 初級保健名錄

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 419139

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
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 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
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 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
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Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA

DEL

Provider ID: 419139
Provider Gender: Female
License Number: A114181
NPI: 1740514249

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA

DEL

Provider ID: 419139
Provider Gender: Female
License Number: A114181
NPI: 1740514249

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A
Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

D2. 初級保健名錄

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 419139

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 419139

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 419139

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 419139

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958


NPI: 1932269198


Provider English Spoken: Y


D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)*
515-2550


 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **STABEN, REBECCA**

Provider ID: 419139

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619)*
515-2550


 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 9:00AM-5:00PM


OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)*
515-2500


 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2500*

 *After Hours Phone: (619)*
515-2500


 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:30PM


OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

D2. 初級保健名錄

CHULA VISTA

Board Certified Specialty: No

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

D2. 初級保健名錄

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
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Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

7592 BROADWAY
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Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416

NPI: 1932329505

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416

NPI: 1932329505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GODDARD, SHANNON

Provider ID: 419139

Provider Gender: Female

License Number: PA56072

NPI: 1780961417

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
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Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GODDARD, SHANNON

Provider ID: 419139

Provider Gender: Female

License Number: PA56072

NPI: 1780961417

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

D2. 初級保健名錄

 After Hours Phone: (619)
515-2550

 Website: N/A


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

NATIONAL CITY

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y


Provider Language(s)


Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y


Provider Language(s)


Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y


Provider Language(s)

Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)

200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y


Provider Language(s)


Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DHARKAR SURBER, SAPNA

D2. 初級保健名錄

Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308
Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

DHARKAR SURBER, SAPNA

Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

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434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417102

Provider Gender: Female



License Number: NP95000203
NPI: 1093130395


Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426

 Website: www.operationsa-mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE **PRACTITIONER**

LIM, IMELDA

Provider ID: 418302

Provider Gender: Female



License Number: NP95000203
NPI: 1093130395


Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426

 Website: www.operationsa-mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE **PRACTITIONER**

LIM, IMELDA

Provider ID: 418302

Provider Gender: Female

License Number: NP95000203
NPI: 1093130395


Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


LIM, IMELDA


Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Tagalog*


Cultural Competency: N

Board Certified Specialty: No

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mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

*Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM*

CERTIFIED NURSE

PRACTITIONER


LUM, YUIN-WAH

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663


NPI: 1942764477


 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


LUM, YUIN-WAH

Provider ID: 418930

Provider Gender: Female

License Number: NP95010663


NPI: 1942764477

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: UCSD LA

*JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: [www.lamaestra.or
g](http://www.lamaestra.or
g)

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185270

Provider Gender: Female

License Number: NP4430


NPI: 1346437464


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185270

Provider Gender: Female

License Number: NP4430


NPI: 1346437464


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA

Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

REAL, MARIA

Provider ID: 185270

Provider Gender: Female

License Number: NP17328

D2. 初級保健名錄


NPI: 1548450471


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

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 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323


 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish




Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308




D2. 初級保健名錄

 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


VILLANUEVA DE GUTIE, BERENICE





Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308


 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVA DE GUTIE, BERENICE



Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No





 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
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Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER



WILLIAMS, BREAHA





Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM


CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female


License Number: A167529


NPI: 1316310840


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinics/paradise-hills-family-clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female


License Number: A167529

NPI: 1316310840

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

662-4100

 *Website: syhealth.org/clinics/paradise-hills-family-clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878


NPI: 1780189209


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 *Phone: (619) 515-2399*

 *After Hours Phone: (619) 515-2399*

 *Website: www.fhcsd.org*
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

ANDAYA, MIKHAEL


Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 *Phone: (619) 515-2399*

 *After Hours Phone: (619) 515-2399*

 *Website: www.fhcsd.org*
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE



BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777


NPI: 1245372507


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*


 *Website: www.operationsa-mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N



D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


FAMILY PRACTICE


BAEZ, BEATRICE

Provider ID: 417102
Provider Gender: Female
License Number: A74777
NPI: 1245372507


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA


Provider ID: 227418
Provider Gender: Female
License Number: A157488
NPI: 1316479892


 *Provider English Spoken: Y*


Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinic s/paradise- hills- family- clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


CAMPBELL, BRIANNA


Provider ID: 227418
Provider Gender: Female
License Number: A157488
NPI: 1316479892


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: CHULA VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinic s/paradise- hills- family- clinic*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

CANLAS, AVELINO

Provider ID: 417102
Provider Gender: Male
License Number: A74854
NPI: 1275682528


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

CANLAS, AVELINO

Provider ID: 417102
Provider Gender: Male
License Number: A74854
NPI: 1275682528

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahnan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619) 662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): NPI: 1629232715

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


HERNANDEZ, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

HERNANDEZ, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic-s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930

Provider Gender: Male

D2. 初級保健名錄


License Number: 20A18460


NPI: 1992230593

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930

Provider Gender: Male


License Number: 20A18460


NPI: 1992230593

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE


LAW, KAREN


Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

D2. 初級保健名錄

Board Certified Specialty: No

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Email:
dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 330 E 8TH ST
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Email:
dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinics/paradise-hills-family-clinic


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄



N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


MOHAMEDI, NADIA


Provider ID: 227418
Provider Gender: Female
License Number: A146819
NPI: 1477947364


 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Spanish
Cultural Competency: N

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619) 662-4100


 **Website:** syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



 **Accessibility:** CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NAVARRO, VANESSA


Provider ID: 227418
Provider Gender: Female
License Number: A113624
NPI: 1952563421

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Filipino, Spanish, Tagalog

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 **Phone:** (619) 662-4100

Fax: (619) 259-2807

 **After Hours Phone:** (619) 662-4100

 **Website:** syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):



N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA


Provider ID: 227418
Provider Gender: Female
License Number: A113624
NPI: 1952563421

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Filipino, Spanish, Tagalog

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 **Phone:** (619) 662-4100

Fax: (619) 259-2807

 **After Hours Phone:** (619) 662-4100

 **Website:** syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):



N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE

NIKZAD, JASON


Provider ID: 361428
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674


 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Farsi, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

 330 E 8TH ST
NATIONAL CITY, CA 91950

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619) 662-4100

 **Website:** www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):






N

 **Accessibility:** CONTACT PROVIDER

FAMILY PRACTICE




NIKZAD, JASON

D2. 初級保健名錄

Provider ID: 361428
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Email:
dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE






OCEGUEDA, JOSHUA

Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: syhealth.org/clinic
s/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM





FAMILY PRACTICE






OCEGUEDA, JOSHUA

Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE





RICHARDSON, DANIELLE

Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic

Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic
s/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RICHARDSON, DANIELLE



Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic




D2. 初級保健名錄

s/paradise- hills- family- clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROBERTS, POMAI







Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE







ROBERTS, POMAI


Provider ID: 227412
Provider Gender: Female

License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE







SCHUMAKER, EDWARD

Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418
Provider Gender: Male

D2. 初級保健名錄

License Number: 20A11518

NPI: 1295977353


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2806


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2806

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

nic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184


NPI: 1720583040


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184


NPI: 1720583040


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,


Provider ID: 418930

NPI: 1417409228

 Provider English Spoken: Y

Cultural Competency: N

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,


Provider ID: 418930

NPI: 1417409228


 Provider English Spoken: Y

Cultural Competency: N

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC


LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270

NPI: 1336353721


 Provider English Spoken: Y
Cultural Competency: N

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FQHC






LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270

NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N

D2. 初級保健名錄

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
Fax: (619) 434-7310
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM




FQHC

OPERATION SAMAHAN - NATIONAL C,

Provider ID: 417102
NPI: 1801907449
 Provider English Spoken: Y
Cultural Competency: N
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN - NATIONAL C,


Provider ID: 417102
NPI: 1801907449
 Provider English Spoken: Y
Cultural Competency: N
 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,







Provider ID: 418302
NPI: 1205134517
 Provider English Spoken: Y
Cultural Competency: N
 2101 GRANGER AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 434-8999
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM






FQHC

OPERATION SAMAHAN GRANGER SCHOOL BASED,


Provider ID: 418302
NPI: 1205134517
 Provider English Spoken: Y
Cultural Competency: N
 2101 GRANGER AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 434-8999
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH NATIONAL CITY,


Provider ID: 227412
NPI: 1003869363
 Provider English Spoken: Y
Cultural Competency: N
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 474-3722
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinic



D2. 初級保健名錄

s/national- city- family- clinic- 1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH NATIONAL CITY,

Provider ID: 227412
NPI: 1003869363
 Provider English Spoken: Y
Cultural Competency: N

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 474-3722


 After Hours Phone: (619) 662-4100



 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH PARADISE HILLS,

Provider ID: 227418
NPI: 1598907487
 Provider English Spoken: Y
Cultural Competency: N

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807


 After Hours Phone: (619) 662-4100



 Website: syhealth.org/clinics/paradise-hills-family-clinic


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH PARADISE HILLS,

Provider ID: 227418
NPI: 1598907487
 Provider English Spoken: Y
Cultural Competency: N

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807


 After Hours Phone: (619) 662-4100



 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428
NPI: 1851757215
 Provider English Spoken: Y
Cultural Competency: N

 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 434-3514


 After Hours Phone: (619) 662-4100



 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428
NPI: 1851757215
 Provider English Spoken: Y
Cultural Competency: N

 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 434-3514

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

HEPATOLOGY


GISH, ROBERT


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Cultural Competency: N


Hospital Affiliation: LOMA


LINDA UNIVERSITY COMM


MED CTR

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM


HEPATOLOGY


GISH, ROBERT

Provider ID: 185270

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese

Cultural Competency: N


Hospital Affiliation: LOMA


LINDA UNIVERSITY COMM

MED CTR

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM


INTERNAL MEDICINE


BRAVERMAN, IRA

Provider ID: 10635

Provider Gender: Male

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL

Board Certified Specialty: Yes

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619) 267-8181

 Website: N/A

Email: SIEAB@AOL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL

Board Certified Specialty: No

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619) 267-8181


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

D2. 初級保健名錄

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855


NPI: 1124176102

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

s/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 330 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 330 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT


HOSPITAL

Board Certified Specialty: No

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

D2. 初級保健名錄

 Website: www.lamaestra.org N

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 798-3977

 After Hours Phone: (619)
798-3977

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 798-3977

 After Hours Phone: (619)
798-3977

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee


Global Medical Center,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

D2. 初級保健名錄

nic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY



ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BAILONY, MOHAMMED

Provider ID: 30132

Provider Gender: Male

NPI: 1376625913

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
PARADISE VALLEY HOSPITAL,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: Yes

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945

Fax: (619) 475-5048

 After Hours Phone: (619)
470-1945

 Website: N/A

Email:

BAILONY@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM


PEDIATRICS

BAILONY, AHMAD

Provider ID: 146949

Provider Gender: Male

NPI: 1790914422

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

PARADISE VALLEY HOSPITAL,


SHARP CHULA VISTA MED

CTR, SHARP MEMORIAL

HOSPITAL

Board Certified Specialty: No

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945

Fax: (619) 475-5048

 After Hours Phone: (619)
470-1945

 Website: N/A

Email:

BAILONYPEDIATRICS@GMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BARBADILLO, TERESITA

Provider ID: 84258

Provider Gender: Female


NPI: 1952416695

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Board Certified Specialty: No


 655 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8601

Fax: (619) 267-2242







 After Hours Phone: (619)

D2. 初級保健名錄

267-8601
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM







PEDIATRICS

BONSU, BEMA

Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Board Certified Specialty: No
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PEDIATRICS






BONSU, BEMA

Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Board Certified Specialty: No
 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS






CONE, STEPHANIE

Provider ID: 185270
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO
Board Certified Specialty: No
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185270
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619)
434-7308
 Website: www.lamaestra.org
g
Email:

D2. 初級保健名錄

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399


 Website: *www.fhcsd.org*

Email: *lucinaj@fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

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 Website: *www.fhcsd.org*

Email: *lucinaj@fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE


VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

 655 EUCLID AVE STE 207

NATIONAL CITY, CA 91950

 Phone: (619) 475-4575

Fax: (619) 475-4578

 After Hours Phone: (619)
475-4575

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 84954

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 527-7700

Fax: (619) 527-3226


 After Hours Phone: (619)
527-7700

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

PEDIATRICS

RANA, DEBORAH

Provider ID: 227418

Provider Gender: Female

License Number: G88347

NPI: 1033191457

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL ENCINITAS, CHULA


VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RANA, DEBORAH

Provider ID: 227418

Provider Gender: Female

License Number: G88347

NPI: 1033191457

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL ENCINITAS, CHULA N


VISTA COMM HOSP

Board Certified Specialty: No

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

UY, CARMELITA

Provider ID: 424443

Provider Gender: Female

NPI: 1154431484

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No

 2340 E 8TH ST STE E
NATIONAL CITY, CA 91950

 Phone: (619) 216-8500

Fax: (619) 216-8511

 After Hours Phone: (619)
216-8511

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA


VISTA MED CTR, RADY


CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

 Phone: (619) 475-4575

Fax: (619) 475-4578

 After Hours Phone: (619)
475-4575

 Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

D2. 初級保健名錄

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male


License Number: PA13694


NPI: 1346382611


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

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434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

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American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female


License Number: PA55660


NPI: 1720524374


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

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Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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 Accessibility: CONTACT
PROVIDER

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License Number: PA55660


NPI: 1720524374


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Cultural Competency: N

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Email: lucinaj@fhcsd.org

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Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ MURGUIA, IRENE

Provider ID: 185270

Provider Gender: Female


License Number: PA20296


NPI: 1447492889

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
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 Website: www.lamaestra.org

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aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ MURGUIA, IRENE

Provider ID: 185270

D2. 初級保健名錄

Provider Gender: Female
License Number: PA20296
NPI: 1447492889
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
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aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

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NPI: 1154609790
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PROVIDER
Hours: M-F 8:00AM-5:30PM

OCEANSIDE

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
📞 Phone: (760) 631-5000
🕒 After Hours Phone: (760)
631-5000
🌐 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

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631-5000
🌐 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D2. 初級保健名錄

American Sign Language (ASL): Cultural Competency: N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341

Provider Gender: Female


License Number: NP95003571


NPI: 1053776914

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

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 After Hours Phone: (760)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

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License Number: NP95003571


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 Website: www.vistacommunityclinic.org

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female


License Number: NP95007885

NPI: 1922421288

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

D2. 初級保健名錄

 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN


Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN





Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000


 Website: www.vistacommu-nityclinic.org

Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER








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Provider Gender: Female
License Number: NP95007885
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Cultural Competency: N
Board Certified Specialty: No
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)

631-5000
 Website: www.vistacommu-nityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI

Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

HALGEDAHL, YI

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI

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Board Certified Specialty: No

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Provider ID: 402436

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NPI: 1619246907

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Provider Language(s)
Spoken: Mandarin

D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No

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631-5000
 Website: www.vistacommunityclinic.org

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Min/Max Age: 0\999

American Sign Language (ASL):
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PROVIDER

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Provider Gender: Female

License Number: NP95006826

NPI: 1619246907


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 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

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631-5000

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Email: credentialing@vcc.org

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Min/Max Age: 0\999

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PRACTITIONER


HALGEDAHL, YI

Provider ID: 402434

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907


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 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

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Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


HALGEDAHL, YI

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (844) 308-5003

 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (844) 308-5003

 After Hours Phone: (844)
308-5003

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE



PRACTITIONER

HALGEDAHL, YI

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (844) 308-5003
 After Hours Phone: (844)
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER



HALGEDAHL, YI

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Board Certified Specialty: No

 4700 N RIVER RD
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER



HALGEDAHL, YI

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N
Board Certified Specialty: No


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (844) 308-5003
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE



PRACTITIONER

HALGEDAHL, YI

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N

Board Certified Specialty: No
 4700 N RIVER RD
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 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366

D2. 初級保健名錄

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)

631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No

4700 N RIVER RD
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057
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631-5000

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. 初級保健名錄

MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

DONNELL, MARTI

Provider ID: 206341

Provider Gender: Female

License Number: C50708

NPI: 1235151366

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No

4700 N RIVER RD
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After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374

NPI: 1831354026

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

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After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

D2. 初級保健名錄

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374


NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374


NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): MEDICAL CTR

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374


NPI: 1831354026


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4700 N RIVER RD

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 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): MEDICAL CTR

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

D2. 初級保健名錄

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR

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PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR


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 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR


Board Certified Specialty: No

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

SA 9:00AM-4:00PM

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

PONSFORD, DIANA

Provider ID: 402436

Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No



517 N HORNE ST
OCEANSIDE, CA 92054



Phone: (760) 631-5000



After Hours Phone: (760) 631-5000



Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

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Provider Gender: Female

License Number: 20A17371

NPI: 1407204969

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No



517 N HORNE ST
OCEANSIDE, CA 92054



Phone: (760) 631-5000



After Hours Phone: (760) 631-5000



Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No



4700 N RIVER RD
OCEANSIDE, CA 92057



Phone: (760) 631-5000



After Hours Phone: (760) 631-5000



Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y





Provider Language(s)

Spoken: Spanish

Cultural Competency: N



Board Certified Specialty: No






D2. 初級保健名錄

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE



VIDAL, MONICA





Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
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631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE



VIDAL, MONICA



Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No




 4700 N RIVER RD
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
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PROVIDER
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FAMILY PRACTICE

VIDAL, MONICA



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Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 4700 N RIVER RD
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 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

TRUECARE,


D2. 初級保健名錄


Provider ID: 480247

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 Fax: (760) 736-8740

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

FQHC


TRUECARE,


Provider ID: 480247


NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 Fax: (760) 736-8740

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 206341

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 206341

NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 206341

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM


FQHC


VISTA COMMUNITY CLINIC,


Provider ID: 206341

NPI: 1316501562

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC,

Provider ID: 206341

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FQHC


VISTA COMMUNITY CLINIC,

Provider ID: 206341

NPI: 1649662719

 Provider English Spoken: Y
Cultural Competency: N

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC


HORNE STREET,

Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC


HORNE STREET,

Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC


HORNE STREET,

Provider ID: 402436

NPI: 1609094036

 Provider English Spoken: Y
Cultural Competency: N

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

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 Website: www.vistacommunityclinic.org


Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436
NPI: 1609094036

 *Provider English Spoken: Y*
Cultural Competency: N

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434
NPI: 1629357355

 *Provider English Spoken: Y*
Cultural Competency: N

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

 *Provider English Spoken: Y*
Cultural Competency: N

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM


SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434


NPI: 1629357355

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Cultural Competency: N

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
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 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 *Provider English Spoken: Y*
Cultural Competency: N

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*

D2. 初級保健名錄

631-5000
 Website: www.vistacommu-nityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

GENERAL PRACTICE


RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommu-nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

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OCEANSIDE, CA 92057

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631-5000

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommu-nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommu-nityclinic.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE


RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667

 After Hours Phone: (760)

891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE


Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667


 After Hours Phone: (760)
891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

D2. 初級保健名錄

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 891-4667

After Hours Phone: (760)
891-4667

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 344145

Provider Gender: Female

NPI: 1437166709

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CHEN, MING

Provider ID: 614195

Provider Gender: Female

NPI: 1851525505

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin,
Portuguese, Spanish,
Taiwanese

Cultural Competency: N

Hospital Affiliation: Adventist

Health Delano

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N





Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No



2210 MESA DR STE 300
OCEANSIDE, CA 92054



D2. 初級保健名錄

 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS



CURLEY, EDWARD






Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS



CURLEY, EDWARD






Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS



CURLEY, EDWARD






Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

D2. 初級保健名錄


PEDIATRICS

DANIELS, SARAH

Provider ID: 433806

Provider Gender: Female

NPI: 1730446527

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

 3605 VISTA WAY STE 130
BLDG B

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

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 Website: www.vistacommunityclinic.org

nityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN


DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

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Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

PEDIATRICS

GUNTA, SUJANA

Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KRAMER, MELISSA

Provider ID: 469759

Provider Gender: Female

NPI: 1467833467

Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MACINTYRE, ELIZABETH

Provider ID: 543354

Provider Gender: Female


NPI: 1336520766

Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 3605 VISTA WAY BLDG B
STE 130
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR



Board Certified Specialty: No




D2. 初級保健名錄

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3731
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS



MCCAMMACK, BRADLEY






Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3731
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS



MCCAMMACK, BRADLEY

Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3731
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY



Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR






Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3731
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3731
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER		
<u>PEDIATRICS</u>	<i>Spoken: Spanish</i>	 3605 VISTA WAY STE 130
MILLER, DONALD	<i>Cultural Competency: N</i>	BLDG B
<i>Provider ID: 433589</i>	<i>Hospital Affiliation: TRI CITY</i>	OCEANSIDE, CA 92056
<i>Provider Gender: Male</i>	<i>MEDICAL CTR, RADY</i>	 <i>Phone: (760) 547-1010</i>
<i>NPI: 1154356582</i>	<i>CHILDRENS HOSPITAL SAN</i>	 <i>After Hours Phone: (760)</i>
 <i>Provider English Spoken: Y</i>	<i>DIEGO</i>	<i>547-1010</i>
<i>Cultural Competency: N</i>	<i>Board Certified Specialty: No</i>	 <i>Website: N/A</i>
<i>Hospital Affiliation: TRI CITY</i>	 2210 MESA DR STE 300	<i>Medi-Cal Open Panel: Yes</i>
<i>MEDICAL CTR, SCRIPPS</i>	OCEANSIDE, CA 92054	<i>Min/Max Age: 0\19</i>
<i>MEMORIAL HOSPITAL</i>	 <i>Phone: (760) 736-6767</i>	<i>American Sign Language (ASL):</i>
<i>ENCINITAS, RADY CHILDRENS</i>	<i>Fax: (760) 736-8740</i>	<i>N</i>
<i>HOSPITAL SAN DIEGO,</i>	 <i>After Hours Phone: (760)</i>	 <i>Accessibility: CONTACT</i>
<i>PALOMAR MEDICAL CENTER,</i>	<i>736-6767</i>	<i>PROVIDER</i>
<i>UCSF BENIOFF CHILDREN'S</i>	 <i>Website: N/A</i>	<i>Hours: M-F 8:00AM-5:00PM</i>
<i>HOSPITAL OAKLAND, SCRIPPS</i>	<i>Medi-Cal Open Panel: Yes</i>	
<i>MEMORIAL HOSPITAL</i>	<i>Min/Max Age: 0\19</i>	
<i>Board Certified Specialty: No</i>	<i>American Sign Language (ASL):</i>	
 3605 VISTA WAY BLDG B	<i>N</i>	
STE 130	 <i>Accessibility: CONTACT</i>	
OCEANSIDE, CA 92056	<i>PROVIDER</i>	
 <i>Phone: (760) 547-1010</i>	<i>Hours: M-F 8:00AM-5:00PM</i>	
 <i>After Hours Phone: (760)</i>	<i>SA 8:00AM-4:30PM</i>	
<i>547-1010</i>		
 <i>Website: N/A</i>	<u>PEDIATRICS</u>	
<i>Medi-Cal Open Panel: Yes</i>	PERKINS, RACHEL	
<i>Min/Max Age: 0\19</i>	<i>Provider ID: 435952</i>	
<i>American Sign Language (ASL):</i>	<i>Provider Gender: Female</i>	
<i>N</i>	<i>NPI: 1427398320</i>	
 <i>Accessibility: CONTACT</i>	 <i>Provider English Spoken: Y</i>	
<i>PROVIDER</i>	<i>Cultural Competency: N</i>	
<i>Hours: M-F 8:00AM-5:00PM</i>	<i>Hospital Affiliation: SCRIPPS</i>	
	<i>MEMORIAL HOSPITAL</i>	
	<i>ENCINITAS, SCRIPPS</i>	
	<i>MEMORIAL HOSPITAL, TRI</i>	
	<i>CITY MEDICAL CTR, UCSF</i>	
	<i>BENIOFF CHILDREN'S</i>	
	<i>HOSPITAL OAKLAND, RADY</i>	
	<i>CHILDRENS HOSPITAL SAN</i>	
	<i>DIEGO</i>	
	<i>Board Certified Specialty: No</i>	
<u>PEDIATRICS</u>		
PARK, RONALD		
<i>Provider ID: 271889</i>		
<i>Provider Gender: Male</i>		
<i>NPI: 1881695914</i>		
 <i>Provider English Spoken: Y</i>		
 <i>Provider Language(s)</i>		
		<u>PHYSICIANS ASSISTANT</u>
		CHISWICK, GARY
		<i>Provider ID: 480247</i>

D2. 初級保健名錄

Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
🕒 After Hours Phone: (760)
966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
🕒 After Hours Phone: (760)
966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
🕒 After Hours Phone: (760)
966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
🕒 After Hours Phone: (760)

966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
🕒 After Hours Phone: (760)
966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 2210 MESA DR STE 300

D2. 初級保健名錄

OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
📞 After Hours Phone: (760) 966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 966-3306
📞 After Hours Phone: (760) 966-3306
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PAUMA VALLEY

FQHC

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY,

Provider ID: 206267
NPI: 1407031693

☑ Provider English Spoken: Y
Cultural Competency: N
📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
☎ Phone: (760) 742-9919
Fax: (858) 633-4696
📞 After Hours Phone: (760) 742-9919
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

FQHC

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY,

Provider ID: 206267
NPI: 1407031693
☑ Provider English Spoken: Y
Cultural Competency: N
📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
☎ Phone: (760) 742-9919
Fax: (858) 633-4696
📞 After Hours Phone: (760) 742-9919
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
📍 13010 POWAY RD
POWAY, CA 92064
☎ Phone: (858) 218-3000
📞 After Hours Phone: (858) 218-3000
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KAUR, JATINDER


Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
📍 13010 POWAY RD
POWAY, CA 92064
☎ Phone: (858) 218-3000
📞 After Hours Phone: (858) 218-3000
🌐 Website: N/A

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD


HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 481187

NPI: 1023518768

 Provider English Spoken: Y
Cultural Competency: N

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000
Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


NEIGHBORHOOD


HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 481187

NPI: 1023518768

 Provider English Spoken: Y
Cultural Competency: N

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

CAPARSO, AMANDA

Provider ID: 602426

Provider Gender: Female

NPI: 1003046004

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR


HEALTH, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL


HOSPITAL

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (760) 737-6935
Fax: (760) 741-2782

 After Hours Phone: (760)
737-6935

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WINE, DAVID

Provider ID: 612886

Provider Gender: Male

NPI: 1811985542

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 675-3100
Fax: (858) 487-4736

 After Hours Phone: (858)
675-3100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

D2. 初級保健名錄

Board Certified Specialty: No

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858)
218-3000
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858)
218-3000
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LINDBACK, SARAH

Provider ID: 161834

Provider Gender: Female

NPI: 1427345487

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

15725 POMERADO RD STE
203
POWAY, CA 92064
Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LOSTETTER, ADRIENNE

Provider ID: 261797

Provider Gender: Female

NPI: 1881607984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR

HEALTH

Board Certified Specialty: No

15725 POMERADO RD STE
203
POWAY, CA 92064
Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOREIRA, LUCILA

Provider ID: 523761

Provider Gender: Female

NPI: 1104846567

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

15725 POMERADO RD STE
203
POWAY, CA 92064
Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340


Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: SU-SA 8:00AM-5:00PM


PEDIATRICS

MORTIMER, DORI


Provider ID: 230552


Provider Gender: Female

NPI: 1417928417

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH

Board Certified Specialty: No

 15725 POMERADO RD STE 203
POWAY, CA 92064

 *Phone: (858) 673-3340*

Fax: (858) 673-1075


 *After Hours Phone: (858) 673-3340*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RAMGREN, AILEEN

Provider ID: 397707

Provider Gender: Female

NPI: 1356785505


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 15725 POMERADO RD STE 203

POWAY, CA 92064

 *Phone: (858) 673-3340*

 *After Hours Phone: (858) 673-3340*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


RENDLER, NATHAN

Provider ID: 30205

Provider Gender: Male

NPI: 1275531337

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Hebrew, Spanish, Yiddish*

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH


Board Certified Specialty: No

 15525 POMERADO RD STE 1
POWAY, CA 92064

 *Phone: (858) 487-8333*

Fax: (858) 487-0856

 *After Hours Phone: (858) 487-8333*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM SA 9:00AM-5:00PM

PEDIATRICS


TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

NPI: 1396744066


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Chinese, Mandarin, Spanish*

Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 15525 POMERADO RD STE B1
POWAY, CA 92064

 *Phone: (858) 487-8333*

Fax: (858) 487-0856

 *After Hours Phone: (858) 484-4003*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM SA 8:30AM-0:00PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA


D2. 初級保健名錄


Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000


 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

PHYSICIANS ASSISTANT


BALDWIN, DONNA


Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000


 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

RAMONA

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH


Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


FQHC

TRUECARE,

Provider ID: 449438
NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-8740


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

TRUECARE,

Provider ID: 449438
NPI: 1245246917

Provider English Spoken: Y
Cultural Competency: N

 220 ROTANZI ST

D2. 初級保健名錄

RAMONA, CA 92065
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438
Provider Gender: Female
License Number: A89893
NPI: 1730386863
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
📍 220 ROTANZI ST
RAMONA, CA 92065
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438
Provider Gender: Female
License Number: A89893
NPI: 1730386863
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
📍 220 ROTANZI ST
RAMONA, CA 92065
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
📍 220 ROTANZI ST

RAMONA, CA 92065
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
📍 220 ROTANZI ST
RAMONA, CA 92065
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY


Provider ID: 449438
Provider Gender: Female
License Number: PA22669


D2. 初級保健名錄


NPI: 1386741072

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438


Provider Gender: Female


License Number: PA22669


NPI: 1386741072

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female


License Number: PA51494


NPI: 1447681150

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female


License Number: PA51494


NPI: 1447681150

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

SAN DIEGO

CARDIOVASCULAR DISEASE


GARIBYAN, VARTAN

Provider ID: 417937

Provider Gender: Male


License Number: 20A12504


NPI: 1790084143


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN

Provider ID: 417937

Provider Gender: Male

License Number: 20A12504


NPI: 1790084143


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ALVAREZ, LISA

Provider ID: 206363

Provider Gender: Female

License Number: NP19911


NPI: 1417262718

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR


Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ALVAREZ, LISA

Provider ID: 206363

Provider Gender: Female

License Number: NP19911

NPI: 1417262718


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

D2. 初級保健名錄

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1356684781

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535

Provider Gender: Male

License Number: NP22974

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769

NPI: 1801881552

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 233-8500


After Hours Phone: (619)
233-8500

Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D2. 初級保健名錄

American Sign Language (ASL):  After Hours Phone: (619) 515-2560

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female


License Number: NP10769


NPI: 1801881552

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male


License Number: NP95009292


NPI: 1386120723

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102


 Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male


License Number: NP95009292


NPI: 1386120723


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female


License Number: NP95020497


NPI: 1871295493

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female


License Number: NP95020497


NPI: 1871295493

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

D2. 初級保健名錄

CERTIFIED NURSE

PRACTITIONER


BESTERFELDT, LYDIA

Provider ID: 482070

Provider Gender: Female

License Number: NP95013060

NPI: 1265929442


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


BESTERFELDT, LYDIA

Provider ID: 482070

Provider Gender: Female

License Number: NP95013060

NPI: 1265929442


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700



Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413

NPI: 1871577023


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413

NPI: 1871577023


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**


CELESTIN-RAMSEY, AKANKE

Provider ID: 451167


Provider Gender: Female


License Number: NP8563


NPI: 1447450275

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*
/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**



CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602


NPI: 1164496386


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

CHASE, AVA LOU


Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

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 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

DHARKAR SURBER, SAPNA

Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619) 255-9155*

 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

DHARKAR SURBER, SAPNA

Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

D2. 初級保健名錄


NPI: 1538707765


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female


License Number: NP95019446

NPI: 1215696307


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

DO, ELAINE

Provider ID: 233532

Provider Gender: Female

License Number: NP95019446

NPI: 1215696307


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY

Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY


Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. 初級保健名錄

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GOLDFINGER, SARAH

Provider ID: 206360
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GOLDFINGER, SARAH

Provider ID: 206360


Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
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515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU








Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER



HA, THU

Provider ID: 482070
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

D2. 初級保健名錄

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
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Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

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 Phone: (858) 279-0925
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 Website: www.sdfamilycare.org
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Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER


CERTIFIED NURSE PRACTITIONER

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Provider ID: 482070
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Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

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SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

Provider ID: 185268
Provider Gender: Female
License Number: NP17008
NPI: 1659579134

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

D2. 初級保健名錄

Provider ID: 185268

Provider Gender: Female


License Number: NP17008


NPI: 1659579134

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH

Provider ID: 402851

Provider Gender: Female

License Number: NP3439


NPI: 1396815866


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HETTIG, JUDITH

Provider ID: 402851

Provider Gender: Female

License Number: NP3439


NPI: 1396815866


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa-mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435


Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa-mahan.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426


 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

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 Phone: (844) 200-2426

 After Hours Phone: (844)
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 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600


NPI: 1902350994


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600


NPI: 1902350994


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852


NPI: 1205019510

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

D2. 初級保健名錄


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNN JOY

Provider ID: 206360

Provider Gender: Female


License Number: NP17852


NPI: 1205019510


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583

Provider Gender: Female


License Number: NP95007712


NPI: 1720590904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583

Provider Gender: Female


License Number: NP95007712


NPI: 1720590904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female

License Number: NP4858

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN

Provider ID: 233532

Provider Gender: Female

License Number: NP4858

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619)
280-2058
Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN

Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)

810-8700
Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

INSTONE, SUSAN

Provider ID: 482070
Provider Gender: Female
License Number: NP4858
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Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

7011 LINDA VISTA RD
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Phone: (858) 810-8700
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810-8700
Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA AKIKO

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619)
563-0250
Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

JOHNSON, SHAWNA AKIKO

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619)
563-0250
Website: www.sdfamilycare
.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male


License Number: NP17838


NPI: 1942456124

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male


License Number: NP17838


NPI: 1942456124

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare

D2. 初級保健名錄

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH


Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH





Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH





Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

D2. 初級保健名錄


Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KLOBERDANZ, KELSEY

Provider ID: 417937
Provider Gender: Female
License Number: NP95005293
NPI: 1235672502
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


KLOBERDANZ, KELSEY

Provider ID: 417937
Provider Gender: Female
License Number: NP95005293
NPI: 1235672502
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LENNON, RYAN


Provider ID: 624977
Provider Gender: Female
License Number: NP95027593
NPI: 1558084855
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 2204 NATIONAL AVE

SAN DIEGO, CA 92113
Phone: (619) 515-2355
 After Hours Phone: (619)
515-2355
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LENNON, RYAN

Provider ID: 624977
Provider Gender: Female
License Number: NP95027593
NPI: 1558084855
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 2204 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2355
 After Hours Phone: (619)
515-2355
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE


PRACTITIONER

LIEBER, CAROL

Provider ID: 517403
Provider Gender: Female
License Number: NP20849

D2. 初級保健名錄

NPI: 1487889846


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551


 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE

PRACTITIONER


LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


LIM, IMELDA


Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LOVE, VICKI

Provider ID: 206363

Provider Gender: Female

License Number: NP17362


NPI: 1699759134


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER


LOVE, VICKI


Provider ID: 206363
Provider Gender: Female
License Number: NP17362
NPI: 1699759134


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*


 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER



LU, TAMMY


Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


LU, TAMMY


Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA


Provider ID: 206363
Provider Gender: Female


License Number: NP95005321
NPI: 1437695079


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


MARTIN, RIA


Provider ID: 206363
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org


Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER

MELTZER, VIRGINIA

Provider ID: 233532

Provider Gender: Female

License Number: NP95015948

NPI: 1821684390

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

 SAN DIEGO, CA 92105
Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: [www.sdfamilycare](http://www.sdfamilycare.org)
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

MELTZER, VIRGINIA

Provider ID: 233532

Provider Gender: Female

License Number: NP95015948

NPI: 1821684390

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,


UCSD LA JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

 SAN DIEGO, CA 92105
Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: [www.sdfamilycare](http://www.sdfamilycare.org)
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233


NPI: 1245652387


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233


NPI: 1245652387


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: [www.lamaestra.or
g](http://www.lamaestra.or
g)

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: [www.lamaestra.or
g](http://www.lamaestra.or
g)

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

NOCEDA, ANA







Provider ID: 233532

Provider Gender: Female

License Number: NP19505

NPI: 1386971760


D2. 初級保健名錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


NOCEDA, ANA

Provider ID: 233532

Provider Gender: Female

License Number: NP19505

NPI: 1386971760


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


NOCEDA, ANA

Provider ID: 482070

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

NOCEDA, ANA


Provider ID: 482070

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

D2. 初級保健名錄

OCAMPO, ELAINE

Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)

279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


OCAMPO, ELAINE


Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


ODA, THAGHAR


Provider ID: 206360

Provider Gender: Female

License Number: NP95000205


NPI: 1063835692


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR


Provider ID: 206363

Provider Gender: Female

License Number: NP95000205


NPI: 1063835692


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR


Provider ID: 206363

Provider Gender: Female

License Number: RN810863


NPI: 1063835692


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR


Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST

D2. 初級保健名錄

SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
🕒 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
🕒 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206360
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
☐ Provider English Spoken: Y

D2. 初級保健名錄

Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

Provider ID: 206363

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636


NPI: 1356083828


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583

Provider Gender: Female

License Number: NP95020636


NPI: 1356083828


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s) Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*


 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769


Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

D2. 初級保健名錄

Provider ID: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377


Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 482070

Provider Gender: Female

License Number: NP16433

NPI: 1902810377


Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Lao,
Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 233532

Provider Gender: Female

License Number: NP16433

NPI: 1902810377

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Lao,
Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

D2. 初級保健名錄

REID, EMILY

Provider ID: 185268

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185268

Provider Gender: Female


License Number: NP95002766


NPI: 1083081467

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROGERS, TANYA

Provider ID: 417987

Provider Gender: Female


License Number: NP95004443


NPI: 1558710038


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROGERS, TANYA

Provider ID: 417987

Provider Gender: Female

License Number: NP95004443


NPI: 1558710038


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

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279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

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CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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CERTIFIED NURSE PRACTITIONER

SABIN, NANCY

D2. 初級保健名錄

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
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279-0925

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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N

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TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

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Provider Gender: Female

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Provider Gender: Female

License Number: NP2390


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Provider ID: 206046

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Cultural Competency: N


Board Certified Specialty: No

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 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female


License Number: NP2390


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SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER



SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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CERTIFIED NURSE

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 Provider Language(s)
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



D2. 初級保健名錄

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Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**

SATTERWHITE, MAURINE


Provider ID: 206046
Provider Gender: Female
License Number: NP7022
NPI: 1225012842

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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CERTIFIED NURSE **PRACTITIONER**

SATTERWHITE, MAURINE


Provider ID: 206046
Provider Gender: Female
License Number: NP7022

NPI: 1225012842
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 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N

Board Certified Specialty: No

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 *Website: www.sdfamilycare.org*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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CERTIFIED NURSE **PRACTITIONER**

SATTERWHITE, MAURINE


Provider ID: 482070
Provider Gender: Female
License Number: NP7022
NPI: 1225012842

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 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No

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.org
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Min/Max Age: 0\150
American Sign Language (ASL): N

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CERTIFIED NURSE **PRACTITIONER**

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Provider Gender: Female
License Number: NP7022
NPI: 1225012842

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
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SA 9:00AM-1:00PM

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female


License Number: NP7374


NPI: 1730567678

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female


License Number: NP7374


NPI: 1730567678

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female


License Number: NP10146


NPI: 1033116652

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female


License Number: NP10146

NPI: 1033116652

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female


License Number: NP10906


NPI: 1295750339

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female


License Number: RN486421


NPI: 1295750339

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female


License Number: RN486421


NPI: 1295750339

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 Phone: (619) 515-2300

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female


License Number: NP10906


NPI: 1295750339

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362


Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female


License Number: NP95006792


NPI: 1730604414

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA


Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

D2. 初級保健名錄

NPI: 1316478092


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA

Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE

PRACTITIONER


TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


TUEROS, VICTORIA

Provider ID: 206360

Provider Gender: Female

License Number: NP2286

NPI: 1598989261


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER





TUEROS, VICTORIA

D2. 初級保健名錄

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

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American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA


Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE




PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

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 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE




PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 206360
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER		PROVIDER
<u>CERTIFIED NURSE PRACTITIONER</u> VELASQUEZ, FERNANDO Provider ID: 419529 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No	<input type="checkbox"/> 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113 <input type="phone"/> Phone: (619) 515-2422 <input type="clock"/> After Hours Phone: (619) 515-2422 <input type="globe"/> Website: www.fhcsd.org Email: dalvarado@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER	<u>PRACTITIONER</u> VELASQUEZ, FERNANDO Provider ID: 356145 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No
<input type="checkbox"/> 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113 <input type="phone"/> Phone: (619) 515-2422 <input type="clock"/> After Hours Phone: (619) 515-2422 <input type="globe"/> Website: www.fhcsd.org Email: dalvarado@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER	<u>CERTIFIED NURSE PRACTITIONER</u> VELASQUEZ, FERNANDO Provider ID: 356145 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No	<input type="checkbox"/> 2391 ISLAND AVE SAN DIEGO, CA 92102 <input type="phone"/> Phone: (619) 515-2435 <input type="clock"/> After Hours Phone: (619) 515-2435 <input type="globe"/> Website: N/A Email: dalvarado@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER
<u>CERTIFIED NURSE PRACTITIONER</u> VELASQUEZ, FERNANDO Provider ID: 419529 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No	<input type="checkbox"/> 2391 ISLAND AVE SAN DIEGO, CA 92102 <input type="phone"/> Phone: (619) 515-2435 <input type="clock"/> After Hours Phone: (619) 515-2435 <input type="globe"/> Website: N/A Email: dalvarado@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER	<u>CERTIFIED NURSE PRACTITIONER</u> VILLALOBOS, REBECA Provider ID: 206360 Provider Gender: Female License Number: NP95015780 NPI: 1184224396 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No
	<input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="phone"/> Phone: (619) 515-2300 <input type="clock"/> After Hours Phone: (619) 515-2300	

D2. 初級保健名錄

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female


License Number: NP95010814


NPI: 1841758984


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female


License Number: NP95010814


NPI: 1841758984


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185268

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

 Provider English Spoken: Y

 Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 416831
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Cultural Competency: N
Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

CERTIFIED NURSE

PRACTITIONER


WOLF, CELIA

Provider ID: 417937

Provider Gender: Female


License Number: NP95001899

NPI: 1245635564


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WOLF, CELIA

Provider ID: 417937

Provider Gender: Female


License Number: NP95001899

NPI: 1245635564


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


GEPSHTEIN, YANA


Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hebrew


Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

Provider English Spoken: Y

Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

Provider English Spoken: Y

Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

CABALLERO, JAMES

Provider ID: 417101

Provider Gender: Male

License Number: DC27726

NPI: 1093991549

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426


Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM


CHIROPRACTOR


CABALLERO, JAMES


Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

CABALLERO, JAMES


Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 9995 CARMEL MOUNTAIN

RD STE B10 AND B11
SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR


GILIBERTO, JOSEPH


Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR


GILIBERTO, JOSEPH


Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 417101
Provider Gender: Male
License Number: DC15775
NPI: 1821463159

Provider English Spoken: Y
 Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 417101

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)
798-3947

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100


Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300


NPI: 1003296096


Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 207382

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y


Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 207382

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y


Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074


NPI: 1235469396


Provider English Spoken: Y


Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. 初級保健名錄

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

ROJAS, RICHARD

Provider ID: 417937

Provider Gender: Male




License Number: DC31024


NPI: 1538318811

Provider English Spoken: Y

D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

ROJAS, RICHARD

Provider ID: 417937

Provider Gender: Male


License Number: DC31024

NPI: 1538318811

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 417937

Provider Gender: Male


License Number: DC33150

NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 417937

Provider Gender: Male


License Number: DC33150

NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206363


Provider Gender: Male


License Number: DC33150

NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206363

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST

D2. 初級保健名錄

SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SU, VENNES

Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
📞 After Hours Phone: (844) 200-2426
🌐 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

SU, VENNES

Provider ID: 417101
Provider Gender: Female

License Number: DC34907
NPI: 1053919928
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 10737 CAMINO RUIZ STE 235
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📞 After Hours Phone: (844) 200-2426
🌐 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
NPI: 1699216622
☐ Provider English Spoken: Y
Cultural Competency: N
📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
☎ Phone: (844) 200-2426
📞 After Hours Phone: (844) 200-2426
🌐 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
NPI: 1699216622
☐ Provider English Spoken: Y
Cultural Competency: N
📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
☎ Phone: (844) 200-2426
📞 After Hours Phone: (844) 200-2426
🌐 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937
Provider Gender: Male
License Number: G16236
NPI: 1639199292
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

D2. 初級保健名錄

MERCY HOSPITAL

Board Certified Specialty: No

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY **METABOLISM DIABETES**

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*


 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY **METABOLISM DIABETES**

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

ENDOCRINOLOGY **METABOLISM DIABETES**

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183

NPI: 1649628587


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

ENDOCRINOLOGY **METABOLISM DIABETES**

CHANG, AMY

Provider ID: 206360

Provider Gender: Female

License Number: A93385

NPI: 1750568911

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,


SADDLEBACK MEMORIAL


MED CTR, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*


 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY **METABOLISM DIABETES**

CHANG, AMY

Provider ID: 206360

D2. 初級保健名錄

Provider Gender: Female
License Number: A93385
NPI: 1750568911
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SADDLEBACK MEMORIAL
MED CTR, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

GANDHI, ANAND

Provider ID: 206360
Provider Gender: Male
License Number: A178494
NPI: 1821651779
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300
Fax: (619) 515-2510
🕒 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

GANDHI, ANAND

Provider ID: 206360
Provider Gender: Male
License Number: A178494
NPI: 1821651779
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
Fax: (619) 515-2510

🕒 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

LEVINE, MATTHEW

Provider ID: 206360
Provider Gender: Male
License Number: A77126
NPI: 1801994231
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

LEVINE, MATTHEW

Provider ID: 206360
Provider Gender: Male
License Number: A77126
NPI: 1801994231
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

D2. 初級保健名錄

MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

RODRIGUEZ MARTINEZ, RENIL

Provider ID: 206360

Provider Gender: Female

License Number: A142703

NPI: 1477817757

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

RODRIGUEZ MARTINEZ, RENIL

Provider ID: 206360

Provider Gender: Female

License Number: A142703

NPI: 1477817757

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER



FAMILY PRACTICE






ABDALLAH, ALI

Provider ID: 206363
Provider Gender: Male
License Number: 20A15471
NPI: 1649699968
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE



ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
Provider Gender: Male
License Number: A157505
NPI: 1588197826
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL
Board Certified Specialty: No




 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
Provider Gender: Male
License Number: A157505
NPI: 1588197826
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM



FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM



FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 417429
Provider Gender: Male
License Number: A163977
NPI: 1942705637

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No


 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*
 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM



FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 417429
Provider Gender: Male
License Number: A163977
NPI: 1942705637


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*
 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAHRAMZI, MARIA



Provider ID: 206362
Provider Gender: Female


License Number: A173486
NPI: 1588141865

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pushto*

Cultural Competency: N
Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE



BAHRAMZI, MARIA


Provider ID: 206362
Provider Gender: Female
License Number: A173486
NPI: 1588141865

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Pushto*

Cultural Competency: N
Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

D2. 初級保健名錄

PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865


Provider English Spoken: Y


Provider Language(s)
Spoken: Pushto

Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865


Provider English Spoken: Y


Provider Language(s)
Spoken: Pushto

Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360

Provider Gender: Female

License Number: A183464

NPI: 1821677584

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


COMMUNITY REGIONAL


MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


BAUTISTA, LUIS


Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation:


COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER

Board Certified Specialty: No

 *316 25TH ST
SAN DIEGO, CA 92102*

 *Phone: (619) 238-5551*

 *After Hours Phone: (619) 238-5551*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 645-6405*

 *After Hours Phone: (619) 645-6405*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE


BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 645-6405*


 *After Hours Phone: (619) 645-6405*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female


License Number: A165398


NPI: 1730684200


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 *1016 OUTER RD
SAN DIEGO, CA 92154*

 *Phone: (619) 429-3733*

 *After Hours Phone: (619) 429-3733*

 *Website: www.ibclinic.org*
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female


License Number: A165398

NPI: 1730684200

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 *1016 OUTER RD
SAN DIEGO, CA 92154*

 *Phone: (619) 429-3733*

 *After Hours Phone: (619)*

D2. 初級保健名錄

429-3733
 Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE




BORTNER, ADAM

Provider ID: 206363
Provider Gender: Male
License Number: A164879
NPI: 1811491749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 206363


Provider Gender: Male
License Number: A164879
NPI: 1811491749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851
Provider Gender: Male
License Number: C53623


D2. 初級保健名錄


NPI: 1346337904


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male


License Number: C53623


NPI: 1346337904

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE


BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


BURTON, LUCAS


Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female


License Number: A157488


NPI: 1316479892


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

D2. 初級保健名錄

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female

License Number: A157488

NPI: 1316479892


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CARRIEDO CENICEROS, MARIA

Provider ID: 227409

Provider Gender: Female

License Number: A78373

NPI: 1295746618

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhe>

alth.org/locations

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CARRIEDO CENICEROS, MARIA

Provider ID: 227409

Provider Gender: Female

License Number: A78373

NPI: 1295746618

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CARSON, COREY

Provider ID: 417937

Provider Gender: Female

License Number: A136616

NPI: 1245599778


 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARSON, COREY

Provider ID: 417937

Provider Gender: Female

License Number: A136616

NPI: 1245599778


 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

CARSON, COREY

Provider ID: 206360

Provider Gender: Female

License Number: A136616

NPI: 1245599778


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARSON, COREY

Provider ID: 206360

Provider Gender: Female

License Number: A136616

NPI: 1245599778


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male


License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362

Provider Gender: Male


License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male


License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHOU, BILL







Provider ID: 206362

Provider Gender: Male

License Number: 20A14794

NPI: 1730448101

D2. 初級保健名錄

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360
Provider Gender: Male
License Number: A163978
NPI: 1083118988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






FAMILY PRACTICE


CHUN, HYUN

Provider ID: 206360
Provider Gender: Male
License Number: A163978
NPI: 1083118988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:30AM-5:30PM


FAMILY PRACTICE

COLLINS, WILLIAM






Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y






D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE



COLLINS, WILLIAM

Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

FAMILY PRACTICE

CORMAN, DANIEL



Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAPPEN, AMANDA


Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DAPPEN, AMANDA

Provider ID: 227409


D2. 初級保健名錄

Provider Gender: Female
License Number: A153414
NPI: 1689037111
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



DAVIS, DEIRDRE

Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

DAVIS, DEIRDRE




Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

FAMBRO, CYNTHIA

Provider ID: 451167
Provider Gender: Female
License Number: A153223
NPI: 1710331707

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA

Provider ID: 451167
Provider Gender: Female
License Number: A153223
NPI: 1710331707
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male


License Number: A171135


NPI: 1033647409


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male


License Number: A171135


NPI: 1033647409

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

515-2545

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*


 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR



Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

 *After Hours Phone: (619) 563-0250*






D2. 初級保健名錄

563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532
Provider Gender: Female
License Number: A112176
NPI: 1710140462
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


GRIFFITHS, KENNETH


Provider ID: 417937
Provider Gender: Male

License Number: C52451
NPI: 1760563068
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE






GRIFFITHS, KENNETH

Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GUTIERREZ, TANIA







Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA

Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
 Provider English Spoken: Y

D2. 初級保健名錄

 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 515-2426*
 *After Hours Phone: (619)
515-2426*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HACHOLSKI, MARK

Provider ID: 206362
Provider Gender: Male
License Number: A169591
NPI: 1568995694

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619)
515-2424*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

HACHOLSKI, MARK


Provider ID: 206362
Provider Gender: Male
License Number: A169591
NPI: 1568995694

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619)
515-2424*
 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
 *After Hours Phone: (619)
515-2454*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE





Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 *Phone: (619) 515-2454*
 *After Hours Phone: (619)
515-2454*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE


Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102

D2. 初級保健名錄


 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560



 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 451167
Provider Gender: Female

License Number: A125329
NPI: 1780979120
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No



 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

HEINRICI, ALEKA



Provider ID: 451167
Provider Gender: Female
License Number: A125329
NPI: 1780979120
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No



 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100




 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409
Provider Gender: Female
License Number: A88893
NPI: 1164508073
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
Fax: (619) 858-1003

 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 858-1003

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Board Certified Specialty: No

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y


Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

Fax: (619) 263-2499

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

D2. 初級保健名錄

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male


D2. 初級保健名錄

License Number: A104052
NPI: 1124155791
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE







LISH, JONATHAN

Provider ID: 206360
Provider Gender: Male
License Number: A177373
NPI: 1811459456
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



FAMILY PRACTICE


LISH, JONATHAN

Provider ID: 206360
Provider Gender: Male
License Number: A177373
NPI: 1811459456
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LIU, JIE

Provider ID: 206362
Provider Gender: Female
License Number: A147758
NPI: 1780066472
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LIU, JIE

Provider ID: 206362
Provider Gender: Female
License Number: A147758
NPI: 1780066472
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Board Certified Specialty: No

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL



Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925



 After Hours Phone: (858)

D2. 初級保健名錄

279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE





MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985


NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE





MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

D2. 初級保健名錄


 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

MATICH, BRANKO


Provider ID: 206046
Provider Gender: Male


License Number: C174985
NPI: 1023437704

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MELGAR, MONICA

Provider ID: 402851
Provider Gender: Female
License Number: A154399
NPI: 1629432174


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE


MELGAR, MONICA

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444


 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409






Provider Gender: Female

License Number: A162332

NPI: 1063945657

 Provider English Spoken: Y

D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE





MORALES, ALEJANDRA

Provider ID: 227409
Provider Gender: Female
License Number: A162332
NPI: 1063945657
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE






NGUYEN, NGOC



Provider ID: 517998

Provider Gender: Male
License Number: A74094
NPI: 1184668105
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE








NGUYEN, NGOC

Provider ID: 517998
Provider Gender: Male
License Number: A74094
NPI: 1184668105
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

NAZI, HARRIS

Provider ID: 206360
Provider Gender: Male
License Number: A146111
NPI: 1174905871
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAZI, HARRIS








Provider ID: 206360
Provider Gender: Male
License Number: A146111
NPI: 1174905871
 *Provider English Spoken: Y*

D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*







FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM






FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE








NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa mahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM SA 8:30AM-5:00PM

FAMILY PRACTICE

NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsa mahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM SA 8:30AM-5:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 517403

D2. 初級保健名錄

Provider Gender: Male

License Number: A156607

NPI: 1356761571

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 517403

Provider Gender: Male

License Number: A156607

NPI: 1356761571

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 419529

Provider Gender: Female

License Number: A121451

NPI: 1255569083

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)
515-2422

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 419529

Provider Gender: Female

License Number: A121451

NPI: 1255569083

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

Phone: (619) 515-2422

After Hours Phone: (619)
515-2422

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 206360

Provider Gender: Female

License Number: A121451

NPI: 1255569083

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PALOMINO, VERONICA

Provider ID: 206360

Provider Gender: Female

License Number: A121451

NPI: 1255569083


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583

Provider Gender: Male

License Number: A82123

NPI: 1194814277


Provider English Spoken: Y


*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619)
233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583

Provider Gender: Male

License Number: A82123

NPI: 1194814277


Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

 *After Hours Phone: (619)*

233-8500

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 618164

Provider Gender: Female


NPI: 1740609387

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN
RD STE 10-11B

SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

Fax: (858) 240-6470

 *After Hours Phone: (844)
200-2426*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN

Provider ID: 206360

Provider Gender: Female

License Number: 20A17478

NPI: 1407200942

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

RAMIREZ, CRISTHIAN

Provider ID: 206360

Provider Gender: Female

License Number: 20A17478

NPI: 1407200942


Provider English Spoken: Y


*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 451167

Provider Gender: Male

License Number: 20A7435


NPI: 1356556021


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 451167

Provider Gender: Male

License Number: 20A7435


NPI: 1356556021


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


RODRIGUEZ, SEAN

Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, SEAN


Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male


License Number: A169434

NPI: 1316479603

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

 316 25TH ST

D2. 初級保健名錄

SAN DIEGO, CA 92102
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403
Provider Gender: Male
License Number: A169434
NPI: 1316479603
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 316 25TH ST
SAN DIEGO, CA 92102
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 255-9155
📠 Fax: (619) 284-4731
🕒 After Hours Phone: (619) 255-9155
🌐 Website: www.lamaestra.org
g
Email:

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 255-9155
📠 Fax: (619) 284-4731
🕒 After Hours Phone: (619) 255-9155
🌐 Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 255-9155
📠 Fax: (619) 284-4731
🕒 After Hours Phone: (619) 255-9155
🌐 Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851
Provider Gender: Male
License Number: A162946
NPI: 1457887911
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 3705 MISSION BLVD
SAN DIEGO, CA 92109
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851
Provider Gender: Male
License Number: A162946
NPI: 1457887911
☐ Provider English Spoken: Y
Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Urdu

Cultural Competency: N

Board Certified Specialty: No

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

🕒 After Hours Phone: (619)
280-2058

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Urdu

Cultural Competency: N

Board Certified Specialty: No

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

🕒 After Hours Phone: (619)
563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA

Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Urdu


Cultural Competency: N


D2. 初級保健名錄


Board Certified Specialty: No Hours: M-F 8:00AM-5:00PM

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619) 280-2058


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA


Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y


 Provider Language(s) Spoken: Urdu


Cultural Competency: N

Board Certified Specialty: No

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SHIRAKI, JEAN

Provider ID: 417987

Provider Gender: Female

License Number: 20A17577

NPI: 1144684382

 Provider English Spoken: Y


 Provider Language(s) Spoken: Japanese


Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHIRAKI, JEAN


Provider ID: 417987

Provider Gender: Female

License Number: 20A17577

NPI: 1144684382

 Provider English Spoken: Y


 Provider Language(s) Spoken: Japanese

Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)

515-2426


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI


Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD

SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

 Provider English Spoken: Y


D2. 初級保健名錄


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 *Phone: (619) 515-2454*

 *After Hours Phone: (619)
515-2454*

 *Website: www.fhcsd.org*


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE


SMOOT, CHARLES


Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619)
515-2435*

 *Website: N/A*


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619)
515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

D2. 初級保健名錄

NPI: 1922041235

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP,

CEDARS SINAI MEDICAL

CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

EISENHOWER MEDICAL CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

SOPHY, ELIZABETH

Provider ID: 403583

Provider Gender: Female

License Number: A157547

NPI: 1013441203

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619) 429-3733

Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619) 429-3733

Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

After Hours Phone: (619) 233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A177462

NPI: 1093276198

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. 初級保健名錄

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



THAI, JUSTIN

Provider ID: 206360

Provider Gender: Male

License Number: A177462


NPI: 1093276198


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


THAI, JUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


THAI, JUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A177462

NPI: 1093276198


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023


NPI: 1326453119


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 515-2426

 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023


NPI: 1326453119

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

D2. 初級保健名錄

 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


TOWNSEND, LAURIE

Provider ID: 206363

Provider Gender: Female

License Number: C174538

NPI: 1053754333


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


TOWNSEND, LAURIE

Provider ID: 206363

Provider Gender: Female

License Number: C174538

NPI: 1053754333


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

TRAN, TONNIA

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA


Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2400

 After Hours Phone: (619)

D2. 初級保健名錄

515-2400
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2400
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782
Provider Gender: Female
License Number: 20A19610
NPI: 1629637285

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782
Provider Gender: Female
License Number: 20A19610
NPI: 1629637285
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org

D2. 初級保健名錄

Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VILLA, MARIA

Provider ID: 107710

Provider Gender: Female

NPI: 1861541385


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N

Board Certified Specialty: No

 655 SATURN BLVD STE J
SAN DIEGO, CA 92154

 Phone: (619) 575-4442

Fax: (619) 575-1297


 After Hours Phone: (619)
575-4442

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583

Provider Gender: Female

License Number: A109828

NPI: 1154554871

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: LONG
BEACH MEMORIAL MED CTR,
UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583

Provider Gender: Female

License Number: A109828


NPI: 1154554871


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LONG
BEACH MEMORIAL MED CTR,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WHITE, KATHERINE

Provider ID: 227409

Provider Gender: Female

License Number: A120447

NPI: 1801112925

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITE, KATHERINE

Provider ID: 227409

Provider Gender: Female

License Number: A120447


NPI: 1801112925


Provider English Spoken: Y


D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


WU, JENNIFER

Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Mandarin, Spanish

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
Cultural Competency: N
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


WU, JENNIFER


Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Mandarin, Spanish

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612


NPI: 1134380710


 *Provider English Spoken: Y*


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE

ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612


NPI: 1134380710


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

D2. 初級保健名錄

<p>PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>ZINK, IRENE</p> <p>Provider ID: 227409</p> <p>Provider Gender: Female</p> <p>License Number: C54198</p> <p>NPI: 1215959549</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: German</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS</p>	<p>MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p><input type="checkbox"/> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113</p> <p><input type="phone"/> Phone: (619) 662-4100</p> <p><input type="clock"/> After Hours Phone: (619) 662-4100</p> <p><input type="globe"/> Website: https://www.syhealth.org/locations</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p><input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:00PM</p>	<p>Provider ID: 206363</p> <p>NPI: 1982747671</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p><input type="checkbox"/> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p><input type="phone"/> Phone: (619) 515-2560</p> <p>Fax: (619) 263-2499</p> <p><input type="clock"/> After Hours Phone: (619) 515-2560</p> <p><input type="globe"/> Website: www.fhcsd.org</p> <p>Email: nancyl@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p><input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>
<p><u>FAMILY PRACTICE</u></p> <p>ZINK, IRENE</p> <p>Provider ID: 227409</p> <p>Provider Gender: Female</p> <p>License Number: C54198</p> <p>NPI: 1215959549</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: German</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS</p>	<p><u>FQHC</u></p> <p>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,</p> <p>Provider ID: 206363</p> <p>NPI: 1982747671</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p><input type="checkbox"/> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p><input type="phone"/> Phone: (619) 515-2560</p> <p>Fax: (619) 263-2499</p> <p><input type="clock"/> After Hours Phone: (619) 515-2560</p> <p><input type="globe"/> Website: www.fhcsd.org</p> <p>Email: nancyl@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p><input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>	<p><u>FQHC</u></p> <p>DOWNTOWN FAMILY CTR AT CONNECTIONS,</p> <p>Provider ID: 417782</p> <p>NPI: 1588901045</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p><input type="checkbox"/> 1250 6TH AVE STE 100 SAN DIEGO, CA 92101</p> <p><input type="phone"/> Phone: (619) 515-2430</p> <p>Fax: (619) 578-2410</p> <p><input type="clock"/> After Hours Phone: (619) 515-2430</p> <p><input type="globe"/> Website: www.fhcsd.org</p> <p>Email: jinah@fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p><input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:00PM</p>

D2. 初級保健名錄

FQHC


DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

 Provider English Spoken: Y
Cultural Competency: N

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430

Fax: (619) 578-2410

 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

 Provider English Spoken: Y
Cultural Competency: N

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

Fax: (619) 255-8002

 After Hours Phone: (619)
515-2426


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC


FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

 Provider English Spoken: Y
Cultural Competency: N

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

Fax: (619) 255-8002

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC


FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070

 Provider English Spoken: Y
Cultural Competency: N

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431

 After Hours Phone: (619)
515-2520

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070


 Provider English Spoken: Y
Cultural Competency: N

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431

 After Hours Phone: (619)
515-2520


 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


FAMILY HEALTH CTR SAN DIEGO-OAK PARK,


Provider ID: 664747


NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619)
515-2406


 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\999

American Sign Language (ASL): *Medi-Cal Open Panel: Yes*

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN


DIEGO-OAK PARK,


Provider ID: 664747

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N

 2114 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2406

 After Hours Phone: (619)
515-2406


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN


DIEGO-OAK PARK,

Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN


DIEGO-OAK PARK,

Provider ID: 418142

NPI: 1336525906

 Provider English Spoken: Y
Cultural Competency: N

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC


FAMILY HLTH CTR OF SD SAN

DIEGO COMMERCIAL,


Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N


 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2422


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR OF SD SAN

DIEGO COMMERCIAL,


Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N


 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE,


D2. 初級保健名錄

Provider ID: 417429

NPI: 1952729303

 Provider English Spoken: Y
Cultural Competency: N

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM


FQHC


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429

NPI: 1952729303

 Provider English Spoken: Y
Cultural Competency: N

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC


FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

 Provider English Spoken: Y
Cultural Competency: N

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC


FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

 Provider English Spoken: Y
Cultural Competency: N

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC


FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900

 Provider English Spoken: Y
Cultural Competency: N

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FQHC



FAMILY HLTH CTR SD HILLCREST,

Provider ID: 417937

NPI: 1629456900







 Provider English Spoken: Y
Cultural Competency: N

D2. 初級保健名錄

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
Fax: (619) 501-9645
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM






FQHC

KING CHAVEZ HEALTH CENTER,

Provider ID: 451167
NPI: 1538262092
 Provider English Spoken: Y
Cultural Competency: N
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 205-1952
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM





FQHC


KING CHAVEZ HEALTH CENTER,

Provider ID: 451167
NPI: 1538262092
 Provider English Spoken: Y
Cultural Competency: N
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 205-1952
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
Fax: (619) 795-9849
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
Fax: (619) 795-9849
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046
NPI: 1780665877
 Provider English Spoken: Y
Cultural Competency: N
 6973 LINDA VISTA RD

D2. 初級保健名錄

SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC **LINDA VISTA HEALTH CARE** **CTR,**

Provider ID: 206046
NPI: 1609905215
☐ Provider English Spoken: Y
Cultural Competency: N
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
LINDA VISTA HEALTH CARE
CTR,
Provider ID: 206046

NPI: 1609905215
☐ Provider English Spoken: Y
Cultural Competency: N
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC **LINDA VISTA HEALTH CARE** **CTR,**

Provider ID: 206046
NPI: 1780665877
☐ Provider English Spoken: Y
Cultural Competency: N
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
LOGAN HEIGHTS FAMILY
HEALTH CENTER,
Provider ID: 206360
NPI: 1447281936
☐ Provider English Spoken: Y
Cultural Competency: N
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
Fax: (619) 234-2447
📞 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

FQHC
LOGAN HEIGHTS FAMILY
HEALTH CENTER,
Provider ID: 206360
NPI: 1447281936
☐ Provider English Spoken: Y
Cultural Competency: N
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
Fax: (619) 234-2447
📞 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

FQHC


LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936

 *Provider English Spoken: Y*
Cultural Competency: N

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

Fax: (619) 232-7011


 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FQHC


LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936

 *Provider English Spoken: Y*
Cultural Competency: N

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

Fax: (619) 232-7011


 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FQHC


MID-CITY COMMUNITY CLINIC,

Provider ID: 233597

NPI: 1962483040

 *Provider English Spoken: Y*
Cultural Competency: N

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

Fax: (858) 633-4681

 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532


NPI: 1962483040


 *Provider English Spoken: Y*
Cultural Competency: N

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

Fax: (858) 633-4682


 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM


FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532


NPI: 1962483040


 *Provider English Spoken: Y*
Cultural Competency: N

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

Fax: (858) 633-4682

 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

FQHC

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597

NPI: 1962483040


 *Provider English Spoken: Y*
Cultural Competency: N

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*







Fax: (858) 633-4681

D2. 初級保健名錄

 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM







FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492
NPI: 1215246996
 Provider English Spoken: Y
Cultural Competency: N
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM







FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492
NPI: 1215246996
 Provider English Spoken: Y
Cultural Competency: N
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM





FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1700821303
 Provider English Spoken: Y
Cultural Competency: N
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
Fax: (619) 501-0627
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831
NPI: 1700821303
 Provider English Spoken: Y
Cultural Competency: N
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
Fax: (619) 683-7586
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1700821303
 Provider English Spoken: Y
Cultural Competency: N
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
Fax: (619) 501-0627
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄

- N**
 *Accessibility: CONTACT PROVIDER*
- FQHC**
NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 416831
NPI: 1700821303
 *Provider English Spoken: Y*
Cultural Competency: N
 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
Fax: (619) 683-7586
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-5:00PM
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 417101
NPI: 1871680397
 *Provider English Spoken: Y*
Cultural Competency: N
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
Fax: (858) 578-4417
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsa*
- mahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 417101
NPI: 1871680397
 *Provider English Spoken: Y*
Cultural Competency: N
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
Fax: (858) 578-4417
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsa*
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
 *Provider English Spoken: Y*
Cultural Competency: N
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
Fax: (858) 536-8034
 *After Hours Phone: (844) 200-2426*
 Website: www.operationsa
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
- FQHC**
OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 418535
NPI: 1699216622
 *Provider English Spoken: Y*
- FQHC**
OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
 *Provider English Spoken: Y*
Cultural Competency: N
 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
Fax: (858) 536-8034
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsa*
mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- FQHC**
OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 418535
NPI: 1699216622
 *Provider English Spoken: Y*

D2. 初級保健名錄

Cultural Competency: N

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

Provider English Spoken: Y
Cultural Competency: N

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917

Provider English Spoken: Y
Cultural Competency: N

2630 1ST AVE SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619) 234-2158

Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917

Provider English Spoken: Y
Cultural Competency: N

2630 1ST AVE SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619) 234-2158

Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

Provider English Spoken: Y
Cultural Competency: N

7011 LINDA VISTA RD SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858) 810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070


NPI: 1457724858

Provider English Spoken: Y

D2. 初級保健名錄


Cultural Competency: N

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FQHC


SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403

NPI: 1598308926

 Provider English Spoken: Y
Cultural Competency: N

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

Fax: (619) 238-3807

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403

NPI: 1598308926

 Provider English Spoken: Y
Cultural Competency: N

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

Fax: (619) 238-3807

 After Hours Phone: (619)
238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409


NPI: 1326225632


 Provider English Spoken: Y
Cultural Competency: N

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409

NPI: 1326225632

 Provider English Spoken: Y
Cultural Competency: N

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

NPI: 1205477841

 Provider English Spoken: Y
Cultural Competency: N

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH


COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

NPI: 1205477841

 Provider English Spoken: Y
Cultural Competency: N

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SHERMAN HEIGHTS FAMILY


HLTH CTRS INC,

Provider ID: 356145

NPI: 1174549232


 Provider English Spoken: Y
Cultural Competency: N

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

Fax: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

SHERMAN HEIGHTS FAMILY


HLTH CTRS INC,

Provider ID: 356145

NPI: 1174549232

 Provider English Spoken: Y
Cultural Competency: N

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

Fax: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER,


Provider ID: 403583

NPI: 1598122871

 Provider English Spoken: Y
Cultural Competency: N

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FQHC

ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER,

Provider ID: 403583

NPI: 1598122871

 Provider English Spoken: Y
Cultural Competency: N

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

D2. 初級保健名錄


NPI: 1417935081


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CALIFORNIA
PACIFIC MED CTR

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461


NPI: 1417935081


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CALIFORNIA
PACIFIC MED CTR

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male


License Number: A159324


NPI: 1639523228

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male


License Number: A159324


NPI: 1639523228

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GENERAL PRACTICE


BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SCRIPPS GREEN

D2. 初級保健名錄

HOSPITAL

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 100677

Provider Gender: Male

NPI: 1952312621

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

3490 PALM AVE

SAN DIEGO, CA 92154

Phone: (619) 423-5616

Fax: (619) 423-5684

After Hours Phone: (619)
423-5616

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 2\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

D2. 初級保健名錄


 *Accessibility: CONTACT PROVIDER*

GENERAL PRACTICE **RECALDE, FRANCISCO**

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*

Board Certified Specialty: No

 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

 *Phone: (619) 284-5622*

Fax: (619) 283-2572


 *After Hours Phone: (619)
507-3050*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


Hours: M-F 8:30AM-5:00PM

GENERAL PRACTICE **RECALDE, FRANCISCO**

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL*

Board Certified Specialty: No

 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

 *Phone: (619) 284-5622*

Fax: (619) 283-2572

 *After Hours Phone: (619)
507-3050*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:00PM

HEPATOLOGY


GISH, ROBERT

Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese*


Cultural Competency: N

*Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM
MED CTR*

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

HEPATOLOGY


GISH, ROBERT


Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese*


Cultural Competency: N

*Hospital Affiliation: LOMA
LINDA UNIVERSITY COMM
MED CTR*

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE

ALASSIL, SALLY


Provider ID: 206360

Provider Gender: Female

License Number: A122238

D2. 初級保健名錄

NPI: 1982044483


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY


Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY


Provider ID: 419529

Provider Gender: Female

License Number: A122238


NPI: 1982044483

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

D2. 初級保健名錄


ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


ANDREWS, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G71080

NPI: 1003164302


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female


License Number: 20A17702


NPI: 1841794344


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937

Provider Gender: Female


License Number: 20A17702


NPI: 1841794344


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA



D2. 初級保健名錄


Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



CHAN, ANDY


Provider ID: 417937
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

CHAN, ANDY



Provider ID: 417937
Provider Gender: Male


License Number: 20A20352
NPI: 1104480912

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



CSAPOCZI, PETER


Provider ID: 451167
Provider Gender: Male
License Number: A96919
NPI: 1841357118

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N
Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114


 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-healt

D2. 初級保健名錄

h- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

INTERNAL MEDICINE


CSAPOCZI, PETER


Provider ID: 451167

Provider Gender: Male

License Number: A96919

NPI: 1841357118


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian*


Cultural Competency: N

Board Certified Specialty: No

 *950 S EUCLID AVE*
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/king- chavez- healt h- center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

INTERNAL MEDICINE


CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390


NPI: 1699138115


 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390


NPI: 1699138115


 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

 *4094 4TH AVE*
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

D2. 初級保健名錄


Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937



Provider Gender: Male


License Number: 20A17657

NPI: 1083117865

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male


License Number: 20A21421


NPI: 1932785367

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE



DIXIT, SHUBHAM

Provider ID: 417937

Provider Gender: Male


License Number: 20A21421


NPI: 1932785367

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Board Certified Specialty: No


 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

D2. 初級保健名錄


 Provider English Spoken: Y N


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672


 Provider English Spoken: Y N


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE


FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male


NPI: 1124060827


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese, Spanish,
Tagalog


Cultural Competency: N


Board Certified Specialty: No

 10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126

 Phone: (858) 695-1262

Fax: (858) 695-2132

 After Hours Phone: (858)
695-1262

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-3:00PM

INTERNAL MEDICINE


FARASAT, SADAF


Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, NATIVIDAD MEDICAL
CENTER, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

FARASAT, SADAF


Provider ID: 206360

Provider Gender: Female

License Number: A147939

NPI: 1255696407

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, NATIVIDAD MEDICAL
CENTER, PALOMAR MEDICAL
CENTER

D2. 初級保健名錄

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752

NPI: 1043742588

📄 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

GERWER, JOHANNA

Provider ID: 206360

Provider Gender: Female

License Number: A169752

NPI: 1043742588

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116

NPI: 1982180329

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 4290 POLK AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 563-0250
🕒 After Hours Phone: (619)
563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

GUTIERREZ, ANGELICA

Provider ID: 233597

Provider Gender: Female

License Number: A175116

NPI: 1982180329

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 4290 POLK AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 563-0250
🕒 After Hours Phone: (619)
563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147


NPI: 1831106103

📄 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1250 6TH AVE STE 100
SAN DIEGO, CA 92101
☎ Phone: (619) 515-2430
🕒 After Hours Phone: (619)
515-2430

D2. 初級保健名錄

 Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male


License Number: 20A7147


NPI: 1831106103


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430


 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324


NPI: 1447678834

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male


License Number: A140324


NPI: 1447678834


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505





 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No


D2. 初級保健名錄



 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
Fax: (619) 501-9645
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JEONG, MATTHEW

Provider ID: 417782
Provider Gender: Male
License Number: A190535
NPI: 1558982512


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No






 1250 6TH AVE STE 100
SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619)
515-2430
 Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

JEONG, MATTHEW

Provider ID: 417782
Provider Gender: Male
License Number: A190535
NPI: 1558982512


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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515-2430
 Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


KRIJGER, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A67762
NPI: 1932278710

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):


N






 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A67762
NPI: 1932278710


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362
Provider Gender: Female
License Number: A140646
NPI: 1265874010

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Hemet
Global Medical Center, Menifee
Global Medical Center
Board Certified Specialty: No

 3544 30TH ST

D2. 初級保健名錄

SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362
Provider Gender: Female
License Number: A140646
NPI: 1265874010
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Hemet
Global Medical Center, Menifee
Global Medical Center
Board Certified Specialty: No
📍 3544 30TH ST
SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167
Provider Gender: Female

License Number: G71855
NPI: 1124176102
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167
Provider Gender: Female
License Number: G71855
NPI: 1124176102
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LEE, MICHAEL

Provider ID: 206360
Provider Gender: Male
License Number: A71671
NPI: 1760406649
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LEE, MICHAEL

Provider ID: 206360
Provider Gender: Male
License Number: A71671
NPI: 1760406649
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

D2. 初級保健名錄

SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LU, STEPHANIE

Provider ID: 206362
Provider Gender: Female
License Number: 20A20252
NPI: 1518524586

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LU, STEPHANIE

Provider ID: 206362
Provider Gender: Female
License Number: 20A20252
NPI: 1518524586

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN

Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MARCINIAK, ROMAN

Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858)
810-8700

D2. 初級保健名錄

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARANJO, RODRIGO

Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARANJO, RODRIGO

Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO


Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

D2. 初級保健名錄

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE **NARAYANAN, MEENA**



Provider ID: 206363
Provider Gender: Female
License Number: A113448
NPI: 1508170697
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE **NARAYANAN, MEENA**

Provider ID: 206363
Provider Gender: Female

License Number: A113448
NPI: 1508170697
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE **PARIKH, MILIND**

Provider ID: 206363
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout
Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE **PARIKH, MILIND**

Provider ID: 206363
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)

515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185268

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185268

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,


SCRIPPS MEMORIAL


HOSPITAL, GROSSMONT


HOSPITAL

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

SASSIC, JESSICA

D2. 初級保健名錄

Provider ID: 417937

Provider Gender: Female


License Number: A185024


NPI: 1598342529


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SASSIC, JESSICA

Provider ID: 417937

Provider Gender: Female


License Number: A185024


NPI: 1598342529


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SHI, RUJING

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399


NPI: 1710446539


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


SHI, RUJING

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399


NPI: 1710446539


 Provider English Spoken: Y


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SMILDE, RENEE

Provider ID: 417937

Provider Gender: Female

License Number: A70175


NPI: 1427010594


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Dutch


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

SMILDE, RENEE

Provider ID: 417937

Provider Gender: Female

License Number: A70175

NPI: 1427010594

Provider English Spoken: Y

Provider Language(s)
Spoken: Dutch

Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360

License Number: C55724

NPI: 1689010324

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360

Provider Gender: Female

License Number: C55724

NPI: 1689010324

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

VALDEZ, KRYSTAL

Provider ID: 417101

Provider Gender: Female

License Number: A156854

NPI: 1629480272

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA


REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL

D2. 初級保健名錄

Provider ID: 417101

Provider Gender: Female

License Number: A156854

NPI: 1629480272

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA


REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL


Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937

Provider Gender: Female

License Number: A169207

NPI: 1346628310


Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937

Provider Gender: Female

License Number: A169207

NPI: 1346628310


Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A60801

NPI: 1043375231

Provider English Spoken: Y

Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A60801

NPI: 1043375231

Provider English Spoken: Y

Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

D2. 初級保健名錄

233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516

Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516

Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516

Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP

Provider ID: 206046
Provider Gender: Male
License Number: C186338
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Provider Language(s) Spoken: Thai
Cultural Competency: N

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After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739






Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

D2. 初級保健名錄

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE




WATTS, ELI

Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY





MOUSSAVIAN, MEHRAN

Provider ID: 206363
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 263-2499
 After Hours Phone: (619)
263-2499
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 206363
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY MEMORIAL HOSPITAL, Adventist Health and Rideout
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 263-2499
 After Hours Phone: (619)
263-2499
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL

CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363
Provider Gender: Male

D2. 初級保健名錄

License Number: A126187

NPI: 1972827806

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERVENTIONAL

CARDIOLOGY

SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Board Certified Specialty: No

4725 MARKET ST

SAN DIEGO, CA 92102



Phone: (619) 515-2560



After Hours Phone: (619)
515-2560



Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHDANI, AYSER

Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SCRIPPS MERCY

HOSPITAL

D2. 初級保健名錄

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER

Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031



 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031




 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)

D2. 初級保健名錄

515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI
Provider ID: 416831
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI
Provider ID: 402851
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male

License Number: G44807


NPI: 1497738439


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male

License Number: G44807

NPI: 1497738439

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD

D2. 初級保健名錄

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

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Provider Gender: Male
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Cultural Competency: N
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OBSTETRICS / GYNECOLOGY

BLAKE, GARY

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Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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Phone: (858) 279-0925
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 402851
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS
Board Certified Specialty: No
3705 MISSION BLVD
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Phone: (619) 515-2444

D2. 初級保健名錄


 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE


Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

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BIRCH HOSP FOR WOMEN

AND NEWBORNS

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OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206362

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NPI: 1376663831

 Provider English Spoken: Y

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Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN


AND NEWBORNS

D2. 初級保健名錄

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No

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 Phone: (619) 515-2300

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 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619)
515-2420

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

D2. 初級保健名錄

CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1225231582

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

D2. 初級保健名錄

CITY MEDICAL CTR

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

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Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

3544 30TH ST
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Phone: (619) 515-2424

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Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS




MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

D2. 初級保健名錄


 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI


CITY MEDICAL CTR

Board Certified Specialty: No

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Min/Max Age: 0\150

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Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI


CITY MEDICAL CTR

Board Certified Specialty: No

 3514 30TH ST
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 Phone: (619) 515-2424

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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 416831

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL


Board Certified Specialty: No

 3514 30TH ST

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 402851

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 3705 MISSION BLVD

SAN DIEGO, CA 92109

D2. 初級保健名錄

 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA




Provider ID: 402851
Provider Gender: Female
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NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 3705 MISSION BLVD
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Min/Max Age: 0\150
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 Accessibility: CONTACT

PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY




CERVANTES, SANDRA

Provider ID: 206362
Provider Gender: Female
License Number: A118095
NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:30PM
F 8:00AM-5:00PM
OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 416831
Provider Gender: Female
License Number: A118095
NPI: 1073701041
 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 206362
Provider Gender: Female
License Number: A118095
NPI: 1073701041
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104

D2. 初級保健名錄

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:30PM
F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



CERVANTES, SANDRA


Provider ID: 206360
Provider Gender: Female
License Number: A118095
NPI: 1073701041

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



CERVANTES, SANDRA


Provider ID: 206360
Provider Gender: Female
License Number: A118095
NPI: 1073701041

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
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Board Certified Specialty: No

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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



CERVANTES, SANDRA


Provider ID: 206363
Provider Gender: Female
License Number: A118095
NPI: 1073701041

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206363
Provider Gender: Female
License Number: A118095
NPI: 1073701041

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. 初級保健名錄

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
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Phone: (619) 515-2560
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515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
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Board Certified Specialty: No

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Min/Max Age: 0\150
American Sign Language (ASL):
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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
1809 NATIONAL AVE
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Phone: (619) 515-2300
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

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Spoken: Spanish
Cultural Competency: N
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Grossmont Hospital
Board Certified Specialty: No
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D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

 3514 30TH ST

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 Phone: (619) 515-2424

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515-2424

 Website: www.fhcsd.org


Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 416831

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS


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Grossmont Hospital

Board Certified Specialty: No

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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No


 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)

515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

D2. 初級保健名錄

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851

Provider Gender: Male


License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444


 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 416831

Provider Gender: Male


License Number: A108228


NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851

Provider Gender: Male


License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

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Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 416831


Provider Gender: Male

License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

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SAN DIEGO, CA 92104

 Phone: (619) 515-2424

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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male


License Number: A108228


NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male

License Number: A108228


D2. 初級保健名錄


NPI: 1629277322


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363

Provider Gender: Male


License Number: A108228


NPI: 1629277322

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363

Provider Gender: Male


License Number: A108228


NPI: 1629277322

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

D2. 初級保健名錄

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

1809 NATIONAL AVE
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Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

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License Number: A178499

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Medi-Cal Open Panel: Yes

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American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

3514 30TH ST
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Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

3514 30TH ST
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Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No

3705 MISSION BLVD
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After Hours Phone: (619)

D2. 初級保健名錄

515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851
Provider Gender: Female
License Number: A178499
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Cultural Competency: N
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MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
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Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 402851
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
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515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 416831
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
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OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

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Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

D2. 初級保健名錄

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
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515-2444
 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 206362

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y




Provider Language(s)
Spoken: Spanish, Yue
Chinese


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3544 30TH ST
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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
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Provider ID: 416831

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s)
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Chinese


Cultural Competency: N

Hospital Affiliation:

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CHULA VISTA

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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
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OBSTETRICS / GYNECOLOGY

**FOLCH TORRES-AGUIAR,
BEATRIZ**

Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

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NPI: 1457794752
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Hospital Affiliation:

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OBSTETRICS / GYNECOLOGY

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☐ Provider Language(s)
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Cultural Competency: N
Hospital Affiliation:
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Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL

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Board Certified Specialty: No
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Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
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OBSTETRICS / GYNECOLOGY

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OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
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Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

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OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

D2. 初級保健名錄

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Provider Language(s)
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Cultural Competency: N

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OBSTETRICS / GYNECOLOGY

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PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

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Board Certified Specialty: No

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American Sign Language (ASL):
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Hours: M-W 8:30AM-5:30PM

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F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

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Provider ID: 402851

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License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 402851


Provider Gender: Female






License Number: A72005

NPI: 1649208711



Provider English Spoken: Y






D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No





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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 402851
Provider Gender: Female
License Number: A72005
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 *Provider English Spoken: Y*
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Spoken: Spanish
Cultural Competency: N
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CORONADO HOSP AND
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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**



Provider ID: 416831
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Hospital Affiliation: SHARP
CORONADO HOSP AND
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Medi-Cal Open Panel: Yes
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American Sign Language (ASL):

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 *Accessibility: CONTACT*
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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 206362
Provider Gender: Female
License Number: A72005
NPI: 1649208711

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
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OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**




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OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA



Provider ID: 206360
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Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON


Provider ID: 206363
Provider Gender: Female
License Number: A116680
NPI: 1700073962

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
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Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **LOEFFLER, ALLISON**

Provider ID: 416831
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)


515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **LOEFFLER, ALLISON**

Provider ID: 206362
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **LOEFFLER, ALLISON**






D2. 初級保健名錄

Provider ID: 206362
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY





LOEFFLER, ALLISON

Provider ID: 402851
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA
Board Certified Specialty: No
 3705 MISSION BLVD
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515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY





LOEFFLER, ALLISON

Provider ID: 402851
Provider Gender: Female
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Spoken: Spanish
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American Sign Language (ASL):

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OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON



Provider ID: 416831
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
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 Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY



MELLENDEZ BERRIOS, IARA DEL


Provider ID: 416831
Provider Gender: Female
License Number: A114181
NPI: 1740514249

D2. 初級保健名錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL

Provider ID: 402851
Provider Gender: Female
License Number: A114181
NPI: 1740514249


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

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Min/Max Age: 0\150



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OBSTETRICS / GYNECOLOGY



MELENDEZ BERRIOS, IARA DEL


Provider ID: 402851
Provider Gender: Female
License Number: A114181
NPI: 1740514249

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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
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American Sign Language (ASL):
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PROVIDER

OBSTETRICS / GYNECOLOGY



MELENDEZ BERRIOS, IARA DEL


Provider ID: 206362
Provider Gender: Female
License Number: A114181
NPI: 1740514249

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

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 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL


Provider ID: 206362
Provider Gender: Female
License Number: A114181
NPI: 1740514249

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

D2. 初級保健名錄

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Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL

Provider ID: 416831

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
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Min/Max Age: 0\18

American Sign Language (ASL):
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PROVIDER

OBSTETRICS / GYNECOLOGY


MELENDEZ BERRIOS, IARA DEL

Provider ID: 206360

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206360

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y



 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

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F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206363

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

D2. 初級保健名錄

4725 MARKET ST
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Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL

Provider ID: 206363

Provider Gender: Female

License Number: A114181

NPI: 1740514249

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

4725 MARKET ST
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Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 402851

Provider Gender: Male

License Number: A154298

NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND






HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

3705 MISSION BLVD

D2. 初級保健名錄

 SAN DIEGO, CA 92109
 Phone: (616) 515-2444
 After Hours Phone: (616) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO



Provider ID: 402851
Provider Gender: Male
License Number: A154298
NPI: 1710316450


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 3705 MISSION BLVD
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 Phone: (616) 515-2444
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


RODRIGUEZ JEREZ, ROBERTO

Provider ID: 416831
Provider Gender: Male
License Number: A154298
NPI: 1710316450


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

 3514 30TH ST
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 Phone: (619) 515-2424
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 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER




OBSTETRICS / GYNECOLOGY


RODRIGUEZ JEREZ, ROBERTO


Provider ID: 206362
Provider Gender: Male
License Number: A154298
NPI: 1710316450

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
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Board Certified Specialty: No

 3544 30TH ST
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American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO





Provider ID: 416831
Provider Gender: Male
License Number: A154298
NPI: 1710316450

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish






Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

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D2. 初級保健名錄

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**






Provider ID: 206362
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
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 3544 30TH ST
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Medi-Cal Open Panel: Yes
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OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206363
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
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GROSSMONT HOSPITAL
Board Certified Specialty: No
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 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206363
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
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Board Certified Specialty: No
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N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206360
Provider Gender: Male
License Number: A154298
NPI: 1710316450
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 1809 NATIONAL AVE
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515-2300
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SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **RODRIGUEZ JEREZ, ROBERTO**

Provider ID: 206360
Provider Gender: Male
License Number: A154298
NPI: 1710316450

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

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TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**

Provider ID: 206360
Provider Gender: Female
License Number: A164859
NPI: 1952751711

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**

Provider ID: 206360
Provider Gender: Female
License Number: A164859
NPI: 1952751711

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY **SAPRA, SONIA**


Provider ID: 206363
Provider Gender: Female
License Number: A164859
NPI: 1952751711

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): *Cultural Competency: N*
N
 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y


Provider Language(s) Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711


Provider English Spoken: Y


Provider Language(s) Spoken: Hindi


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y


Provider Language(s) Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y


Provider Language(s) Spoken: Hindi


Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*


 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA








Provider ID: 402851

Provider Gender: Female




License Number: A164859



NPI: 1952751711

D2. 初級保健名錄


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **SHUCKETT, ARIEL**

Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)

279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



OBSTETRICS / GYNECOLOGY **SHUCKETT, ARIEL**

Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **SHUCKETT, ARIEL**

Provider ID: 206046
Provider Gender: Female

License Number: A144372
NPI: 1245590124
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Board Certified Specialty: No
 6973 LINDA VISTA RD
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Min/Max Age: 0\150
American Sign Language (ASL):
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PROVIDER

OBSTETRICS / GYNECOLOGY **SHUCKETT, ARIEL**





Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
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Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925



D2. 初級保健名錄

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA


Provider ID: 402851
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA






Provider ID: 402851
Provider Gender: Female


License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
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 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY





STABEN, REBECCA


Provider ID: 416831
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org

Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 416831
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198

D2. 初級保健名錄

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206363
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



OBSTETRICS / GYNECOLOGY





STABEN, REBECCA

Provider ID: 206360
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Board Certified Specialty: No
 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 451167
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



WINESBURG, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2420

 After Hours Phone: (619)
515-2420

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



WINESBURG, JENNIFER

Provider ID: 206362

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2400

 After Hours Phone: (619)
515-2400

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY



WINESBURG, JENNIFER

Provider ID: 206362

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR
Board Certified Specialty: No

 3544 30TH ST
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 Phone: (619) 515-2400

 After Hours Phone: (619)
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 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY



WINESBURG, JENNIFER

Provider ID: 416831

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,


DESERT REGIONAL MED CTR

Board Certified Specialty: No

 3705 MISSION BLVD
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 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**


Provider ID: 416831

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND
HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP


AND HEALTHCARE CTR,


SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

D2. 初級保健名錄

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: G78814

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

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SAN DIEGO, CA 92109

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515-2444

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  Provider English Spoken: Y

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  Provider English Spoken: Y

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  Provider English Spoken: Y

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):






D2. 初級保健名錄

N


 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 **Phone:** (619) 515-2560
 **After Hours Phone:** (619)
515-2560
 **Website:** www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N



 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID




Provider ID: 206360
Provider Gender: Male
License Number: A68124

NPI: 1396715991

 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 **Phone:** (619) 515-2300
 **After Hours Phone:** (619)
515-2300
 **Website:** www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 **Accessibility:** CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID




Provider ID: 206360
Provider Gender: Male
License Number: A68124
NPI: 1396715991


 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 **Phone:** (619) 515-2300
 **After Hours Phone:** (619)
515-2300

 **Website:** www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



 **Accessibility:** CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541

 **Provider English Spoken:** Y
 **Provider Language(s)**
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 **Phone:** (619) 515-2560
 **After Hours Phone:** (619)

D2. 初級保健名錄

515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

ZABLIT, KARIM

Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538

Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OPHTHALMOLOGY

ZABLIT, KARIM

Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY

DAVIS, MORGAN

Provider ID: 206360
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

DAVIS, MORGAN

Provider ID: 206360
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

📋 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

📋 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

ABELL, GEOFFREY

Provider ID: 27341

Provider Gender: Male

NPI: 1245256130

📋 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

📍 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
☎ Phone: (619) 262-8624
Fax: (619) 262-6639

🕒 After Hours Phone: (619)

262-8624

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

📋 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
☎ Phone: (619) 280-4213
🕒 After Hours Phone: (619)
280-4213

🌐 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

D2. 初級保健名錄

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178


Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y


Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 749-5480

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y


Provider Language(s)

Spoken: Arabic, Spanish

Cultural Competency: N


Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 749-5480

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964


 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070

Provider Gender: Male

License Number: A72833

D2. 初級保健名錄

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

Provider ID: 5589

Provider Gender: Male

NPI: 1992776918

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, PALOMAR HEALTH,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, CHILDRENS

HOSPITAL OF ORANGE

COUNTY, PARADISE VALLEY

D2. 初級保健名錄

HOSPITAL, PARADISE VALLEY
HOSPITAL

Board Certified Specialty: No

16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)
924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360

Provider Gender: Female

License Number: A44027

NPI: 1447265137

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish, Ukrainian

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Email: janeta@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

AZIMI, AYSUN


Provider ID: 317194
Provider Gender: Female
NPI: 1710246160
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL, CLOVIS COMMUNITY HOSPITAL


Board Certified Specialty: No

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 *Phone: (619) 262-8624*

Fax: (619) 262-6639

 *After Hours Phone: (619) 262-8624*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


BAJWA, MANDEEP

Provider ID: 416831

Provider Gender: Male

License Number: A186551

NPI: 1720615867


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 3514 30TH ST

SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*


Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS


BAJWA, MANDEEP

Provider ID: 416831

Provider Gender: Male


License Number: A186551

NPI: 1720615867


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 3514 30TH ST

SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND


Board Certified Specialty: No

 3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

Hours: M-F 8:00AM-5:00PM

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

BONSU, BEMA


Provider ID: 227409

Provider Gender: Male


License Number: C55180


D2. 初級保健名錄


NPI: 1932106986

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

BOWERS, JESSIE


Provider ID: 394841


Provider Gender: Female

NPI: 1730594235

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858)
566-4444

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CABARLO, JEHRIB

Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CARSON, STEPHEN

Provider ID: 6735

Provider Gender: Male

NPI: 1780719872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: Yes

 550 WASHINGTON ST STE
300


SAN DIEGO, CA 92103

 Phone: (619) 297-5437

Fax: (619) 297-4567

D2. 初級保健名錄

 After Hours Phone: (619) 297-5437

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-8:30PM

F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268

Provider Gender: Female

License Number: A111170

NPI: 1417279324

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268

Provider Gender: Female

License Number: A111170

NPI: 1417279324

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: A141057

NPI: 1255785150


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: A141057

NPI: 1255785150


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHEN, EILEEN

Provider ID: 606456


Provider Gender: Female

NPI: 1932660966

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279


 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS


CONE, STEPHANIE


Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619)
255-9154

 Website: www.lamaestra.org


g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM



D2. 初級保健名錄

TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

PEDIATRICS

CORDES, WILLIAM


Provider ID: 206360
Provider Gender: Male
License Number: 20A15743
NPI: 1174942544


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM


F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070
Provider Gender: Female
License Number: A137415
NPI: 1467751131


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

FISHMAN, ELENA

Provider ID: 524340

Provider Gender: Female

NPI: 1740249432

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY

CHILDRENS HOSPITAL SAN


DIEGO, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

 11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

Fax: (858) 793-1035

 After Hours Phone: (858)
793-1011

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 206360

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831

Provider Gender: Male

License Number: A95577

NPI: 1801088422

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FRIEDMAN, JAIME

Provider ID: 230500

Provider Gender: Female

NPI: 1144297961

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

D2. 初級保健名錄

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH
Board Certified Specialty: No

16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

Phone: (858) 924-1960

Fax: (858) 924-1964

After Hours Phone: (858)
924-1960

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268

Provider Gender: Female

License Number: A163693

NPI: 1023506367

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9154

After Hours Phone: (619)
255-9154

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268

Provider Gender: Female

License Number: A163693

NPI: 1023506367

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9154

After Hours Phone: (619)
255-9154

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS


GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi, Spanish*


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi, Spanish*


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


HANSEN, JOHN

Provider ID: 318919

Provider Gender: Male

NPI: 1780655621

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Danish*

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL CHULA VISTA,

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS


Board Certified Specialty: No

 7910 FROST ST STE 400

SAN DIEGO, CA 92123

 *Phone: (858) 495-0500*

Fax: (858) 560-4279

 *After Hours Phone: (858) 495-0500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HENDERSON, TREVOR

Provider ID: 58111

Provider Gender: Male

NPI: 1356449425

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP

FOR WOMEN AND


NEWBORNS, RADY

CHILDRENS HOSPITAL SAN


DIEGO, ALVARADO HOSPITAL

LLC

Board Certified Specialty: No

 6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

 *Phone: (619) 265-3400*

Fax: (619) 265-3407

 *After Hours Phone: (619) 265-3400*

 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


D2. 初級保健名錄

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


HIBBS, NICOLE

Provider ID: 143979
Provider Gender: Female
NPI: 1164627832
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
 550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
 *Phone: (619) 297-5437*
Fax: (619) 297-4567
 *After Hours Phone: (619) 297-5437*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM



PEDIATRICS

HOANG, VY


Provider ID: 161902

Provider Gender: Female
NPI: 1649575135
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
 6699 ALVARADO RD
SAN DIEGO, CA 92120
 *Phone: (619) 265-3400*
Fax: (619) 265-3407

 *After Hours Phone: (619) 265-3400*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


HORMOZDYARAN, SANAYA

Provider ID: 612398
Provider Gender: Female
NPI: 1750887634
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No


 2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106
 *Phone: (619) 222-1253*
Fax: (619) 222-1276

 *After Hours Phone: (619)*

222-1253


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM


PEDIATRICS

JORDAN, JAMIE


Provider ID: 237831
Provider Gender: Female
NPI: 1275762833
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131
 *Phone: (858) 566-4444*
Fax: (858) 566-3321

 *After Hours Phone: (858) 566-4444*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JUAREZ, PATRICIA

D2. 初級保健名錄

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP

MEMORIAL HOSPITAL, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500
Fax: (858) 560-4279

After Hours Phone: (858)
495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KESANAPALLI, DEEPTHI

Provider ID: 235069

Provider Gender: Female

NPI: 1487948584

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS

Board Certified Specialty: No

7910 FROST ST STE 335
SAN DIEGO, CA 92123

Phone: (858) 576-8010

Fax: (858) 576-7391

After Hours Phone: (858)
576-8010

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-6:00PM

F 8:30AM-0:00PM

PEDIATRICS

LAWRIE, ALISA

Provider ID: 660912

Provider Gender: Female

D2. 初級保健名錄

NPI: 1407847908

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL

Board Certified Specialty: No

 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

 Phone: (619) 297-4567


 After Hours Phone: (619)
297-4567

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM

PEDIATRICS


LIU, JESICA

Provider ID: 206363

Provider Gender: Female

License Number: A166312

NPI: 1184157620


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


LIU, JESICA

Provider ID: 206363

Provider Gender: Female

License Number: A166312

NPI: 1184157620


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS

LOPER, KAREN

Provider ID: 490610

Provider Gender: Female

NPI: 1619908936

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 550 WASHINGTON ST STE

300

SAN DIEGO, CA 92103

 Phone: (619) 297-5437

Fax: (619) 297-4567


 After Hours Phone: (619)
297-5437

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LUJAN, ARLEEN

Provider ID: 206360

Provider Gender: Female

License Number: A61687


NPI: 1760412431


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

PEDIATRICS


LUJAN, ARLEEN

Provider ID: 206360

Provider Gender: Female

License Number: A61687

NPI: 1760412431

 Provider English Spoken: Y

 Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS


MADANY, GEORGE

Provider ID: 318924

Provider Gender: Male

NPI: 1811968837

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN


DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Board Certified Specialty: No

 7910 FROST ST STE 400

SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MANRIQUEZ-CASTILLO,

ERENDIRA


Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

 Provider English Spoken: Y

 Cultural Competency: N

Hospital Affiliation: VALLEY

CHILDRENS HOSPITAL, RADY

CHILDRENS HOSPITAL SAN



DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

D2. 初級保健名錄

 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533


NPI: 1356397418


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MARTINEZ ANDREE, INGRID

Provider ID: 319049

Provider Gender: Female


NPI: 1205807203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MLNARIK, ANASTASIA

Provider ID: 558645


Provider Gender: Female

NPI: 1972000537


 Provider English Spoken: Y
Cultural Competency: N

 11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

 Phone: (858) 793-1011

Fax: (858) 793-1035

 After Hours Phone: (858)
793-1011

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

PARK, TARI

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858)
566-4444

 Website: N/A


Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\19

American Sign Language (ASL): **PEDIATRICS**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female


License Number: G81658


NPI: 1477626513


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM


PARKER, SHERINE

Provider ID: 206360

Provider Gender: Female


License Number: G81658


NPI: 1477626513


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831

Provider Gender: Female

License Number: A126181


NPI: 1740467299


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831

Provider Gender: Female

License Number: A126181


NPI: 1740467299


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424


 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

D2. 初級保健名錄

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

POWELL, STEPHANIE

Provider ID: 319033

Provider Gender: Female

NPI: 1720059744

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Board Certified Specialty: No

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279


 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE

D2. 初級保健名錄

SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305
Provider Gender: Male
NPI: 1689633844
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

11943 EL CAMINO REAL STE 210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858) 793-1011

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SAMPATH, SRIVIDYA



Provider ID: 416831
Provider Gender: Female
License Number: A132576
NPI: 1275892754
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104





D2. 初級保健名錄

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS



SAMPATH, SRIVIDYA

Provider ID: 416831
Provider Gender: Female
License Number: A132576
NPI: 1275892754
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS



SEBSO, JODI

Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No





 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBSO, JODI



Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBSO, JODI

Provider ID: 206360
Provider Gender: Female
License Number: A103099
NPI: 1538484316
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SEBSO, JODI

D2. 初級保健名錄

Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SHENOY, ASHVIN

Provider ID: 232392

Provider Gender: Male

NPI: 1619262664

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)
262-8624

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH

Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SHIAU, NANCY

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779


D2. 初級保健名錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, ALVARADO
HOSP MED CTR

Board Certified Specialty: No


 6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

 *Phone: (619) 265-3400*

Fax: (619) 265-3407

 *After Hours Phone: (619)*
265-3400

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*

 *After Hours Phone: (619)*
515-2525


 *Website: www.fhcsd.org*

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS


SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*

 *After Hours Phone: (619)*
515-2525

 *Website: www.fhcsd.org*

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)*
515-2300

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

PEDIATRICS

SPITZER, MARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. 初級保健名錄

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

STUMP, CHARI

Provider ID: 587747

Provider Gender: Female

NPI: 1265968788

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858)
495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SUBRAMANIAN, RAMA

Provider ID: 662343

Provider Gender: Female

NPI: 1932593506

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858)
793-1011

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA

D2. 初級保健名錄

Provider ID: 416831

Provider Gender: Female

License Number: A51318


NPI: 1659303121


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA

Provider ID: 416831

Provider Gender: Female

License Number: A51318


NPI: 1659303121


Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

D2. 初級保健名錄

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858)
793-1011

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

WATERS, ELIZABETH

Provider ID: 153090

Provider Gender: Female

NPI: 1730477621

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, PARADISE

VALLEY HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SCRIPPS MERCY HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Board Certified Specialty: No

292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)
262-8624

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

WEATHERLY, JACOB

Provider ID: 637376

Provider Gender: Male

NPI: 1538520457

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE

SALTER PACKARD CHILDRENS





HOSP, Stanford Health Care

Board Certified Specialty: No

6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

D2. 初級保健名錄

 Phone: (619) 265-3400
Fax: (619) 265-3407
 After Hours Phone: (619) 265-3400
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM








PEDIATRICS

WONG, YOLANDA

Provider ID: 233532
Provider Gender: Female
License Number: A94449
NPI: 1851599872
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



PEDIATRICS

WONG, YOLANDA

Provider ID: 233532
Provider Gender: Female
License Number: A94449
NPI: 1851599872
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

WONG, YOLANDA







Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A61238

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS


ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ZAHEER, AARON


Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish


Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


 4305 UNIVERSITY AVE STE

150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

PEDIATRICS


ZANDKARIMI, FARIBA


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
GENERAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY


HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA, UCSD
MEDICAL CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZANDKARIMI, FARIBA


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
GENERAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN


DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA, UCSD
MEDICAL CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)

515-2422

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185268

D2. 初級保健名錄

Provider Gender: Male
License Number: PA13694
NPI: 1346382611
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
📞 Phone: (619) 255-9155
📞 After Hours Phone: (619)
255-9155
🌐 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185268
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
📞 Phone: (619) 255-9155
📞 After Hours Phone: (619)
255-9155
🌐 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
📞 Phone: (619) 515-2300
📞 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
📞 Phone: (619) 515-2300
📞 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
📞 Phone: (619) 515-2300
📞 After Hours Phone: (619)
515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 3544 30TH ST
SAN DIEGO, CA 92104
📞 Phone: (619) 515-2424
📞 After Hours Phone: (619)
515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

D2. 初級保健名錄

Provider ID: 206362

Provider Gender: Female


License Number: PA17220


NPI: 1376550657

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female


License Number: PA23258


NPI: 1790111607

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female


License Number: PA23258


NPI: 1790111607

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

Provider ID: 403583

Provider Gender: Female


License Number: PA54617


NPI: 1679096341

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

Provider ID: 403583

Provider Gender: Female


License Number: PA54617


NPI: 1679096341

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

DOLMETSCH, JEANETTE

Provider ID: 417987

Provider Gender: Female

License Number: PA58905

NPI: 1164941456

D2. 初級保健名錄

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

DOLMETSCH, JEANETTE

Provider ID: 417987
Provider Gender: Female
License Number: PA58905
NPI: 1164941456
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

DROME, SALWA

Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

DROME, SALWA

Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619) 515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831
Provider Gender: Female
License Number: PA21042
NPI: 1447567995
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org

D2. 初級保健名錄

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676


Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430

 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org


D2. 初級保健名錄

Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT



LANDIS, SARAH


Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No


 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430
 After Hours Phone: (619)
515-2430

 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM



PHYSICIANS ASSISTANT


LAPINA, LORI

Provider ID: 417937
Provider Gender: Female
License Number: PA23231
NPI: 1245670413

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT


LAPINA, LORI

Provider ID: 417937
Provider Gender: Female
License Number: PA23231
NPI: 1245670413

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT


LEON, FLOR

Provider ID: 356145
Provider Gender: Female
License Number: PA53788
NPI: 1902358237

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435
 After Hours Phone: (619)
515-2435

 Website: N/A
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


LEON, FLOR

Provider ID: 419529
Provider Gender: Female
License Number: PA53788
NPI: 1902358237

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 419529

Provider Gender: Female

License Number: PA53788


NPI: 1902358237


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 *Phone: (619) 515-2422*

 *After Hours Phone: (619) 515-2422*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 356145

Provider Gender: Female

License Number: PA53788


NPI: 1902358237


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 2391 ISLAND AVE

SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

 *After Hours Phone: (619) 515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 206360

Provider Gender: Female

License Number: PA53788


NPI: 1902358237


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LEON, FLOR

Provider ID: 206360

Provider Gender: Female

License Number: PA53788


NPI: 1902358237


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752


NPI: 1487307369


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2

SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

D2. 初級保健名錄


License Number: PA62752


NPI: 1487307369

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female


License Number: PA63071


NPI: 1902580426

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female


License Number: PA63071


NPI: 1902580426

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male


License Number: PA21385


NPI: 1932335080

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male


License Number: PA21385


NPI: 1932335080

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male


License Number: PA21385

NPI: 1932335080

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

D2. 初級保健名錄

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385


NPI: 1932335080


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296


NPI: 1447492889


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296


NPI: 1447492889


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790


Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

D2. 初級保健名錄

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT


MILLER, LAUREL

Provider ID: 206363

Provider Gender: Female

License Number: PA20378


NPI: 1598992133


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


MILLER, LAUREL

Provider ID: 206363

Provider Gender: Female

License Number: PA20378


NPI: 1598992133


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
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Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


NUNO, JOSE

Provider ID: 206360

Provider Gender: Male

License Number: PA15227


NPI: 1275543068


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

NUNO, JOSE

Provider ID: 206360

Provider Gender: Male

License Number: PA15227


NPI: 1275543068


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

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 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360

Provider Gender: Male

License Number: PA56636


NPI: 1083176077


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

D2. 初級保健名錄

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360

Provider Gender: Male


License Number: PA56636


NPI: 1083176077


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110


Provider English Spoken: Y


Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare
.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

D2. 初級保健名錄


 Provider English Spoken: Y N


 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female


License Number: PA60864


NPI: 1225608722


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female


License Number: PA60864


NPI: 1225608722


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)

515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591


NPI: 1790055010

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

D2. 初級保健名錄

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409
Provider Gender: Female
License Number: PA52141
NPI: 1407855828
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






PHYSICIANS ASSISTANT


RASMUSSEN, DALE

Provider ID: 417429
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY
HOSPITAL OF FOLSOM
Board Certified Specialty: No
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525
 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY
HOSPITAL OF FOLSOM
Board Certified Specialty: No
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 Phone: (619) 515-2525
 After Hours Phone: (619)
515-2525
 Website: www.fhcsd.org

Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM



PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 316 25TH ST

D2. 初級保健名錄

SAN DIEGO, CA 92102
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452

☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: PA58081
NPI: 1215264452

☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452

☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4725 MARKET ST
SAN DIEGO, CA 92102
☎ Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363
Provider Gender: Female
License Number: PA58081
NPI: 1215264452
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
📍 4725 MARKET ST
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☎ Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
📞 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360

Provider Gender: Female

License Number: PA20396

NPI: 1992934988


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

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 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664

NPI: 1841472776

Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664

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Cultural Competency: N

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American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish, Vietnamese


Cultural Competency: N

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

 *After Hours Phone: (619) 563-0250*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Vietnamese

Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

D2. 初級保健名錄

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Board Certified Specialty: No

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

☎ After Hours Phone: (619) 563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Board Certified Specialty: No

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PODIATRIST

JUAREZ, LETICIA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5661

NPI: 1508393778

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese




Cultural Competency: N

Hospital Affiliation: ANAHEIM

REGIONAL MEDICAL CTR


D2. 初級保健名錄

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864




 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N

*Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR*

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Vietnamese*

Cultural Competency: N

*Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR*

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


LE, DIANA


Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Vietnamese*



Cultural Competency: N


*Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR*

Board Certified Specialty: No

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360




Provider Gender: Female


License Number: DPM4819

NPI: 1326282237

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819


D2. 初級保健名錄


NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429


Provider Gender: Female


License Number: DPM4819


NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female


License Number: DPM4819


NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female


License Number: DPM4819


NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female


License Number: DPM4819


NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org


Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

D2. 初級保健名錄

MEDICAL CTR

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

6973 LINDA VISTA RD
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Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No


D2. 初級保健名錄

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


HILL, LINDA

Provider ID: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish


Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male


License Number: G70886

NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male


License Number: G70886

NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

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 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL


RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No

 *7011 LINDA VISTA RD*
SAN DIEGO, CA 92111

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 *After Hours Phone: (858) 810-8700*


 *Website: www.sdfamilycare.org*

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Min/Max Age: 0\150

American Sign Language (ASL):

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 *Accessibility: CONTACT PROVIDER*

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TU 8:30AM-9:00PM

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SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

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Min/Max Age: 0\150

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SA 9:00AM-4:00PM

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License Number: G70886


NPI: 1952386765

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: Yes

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: French, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS


Board Certified Specialty: No

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858) 279-0925*


 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

D2. 初級保健名錄

Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

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Fax: (858) 279-0377

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279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

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After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925
Fax: (858) 279-0377

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew

Cultural Competency: N


Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300





After Hours Phone: (619)
515-2300

D2. 初級保健名錄

515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CHAVARRIA, JESSICA





Provider ID: 417937
Provider Gender: Female
License Number: PT292351
NPI: 1407391808
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545



 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CHAVARRIA, JESSICA





Provider ID: 417937


Provider Gender: Female
License Number: PT292351
NPI: 1407391808
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
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 Phone: (619) 515-2545
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515-2545


 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CONCORS, ANDREW





Provider ID: 417937
Provider Gender: Male
License Number: PT12930
NPI: 1578706743
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
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 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CONCORS, ANDREW

Provider ID: 417937
Provider Gender: Male
License Number: PT12930
NPI: 1578706743
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 417937
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
 Provider English Spoken: Y


D2. 初級保健名錄


 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384


 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

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 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

REGISTERED PHYSICAL

THERAPIST


DAHMS, MADELYNN


Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702


 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Sign Language


Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


DAHMS, MADELYNN

Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

 1809 NATIONAL AVE

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 *Phone: (619) 515-2300*

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 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST


FIELDING, JOSEPH

Provider ID: 417937

Provider Gender: Male

License Number: PT40975


NPI: 1235577560


 *Provider English Spoken: Y*


Cultural Competency: N

Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL


THERAPIST

FIELDING, JOSEPH



Provider ID: 417937


D2. 初級保健名錄

Provider Gender: Male
License Number: PT40975
NPI: 1235577560


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



REGISTERED PHYSICAL THERAPIST


HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License Number: PT292613
NPI: 1003354895

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
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 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



REGISTERED PHYSICAL THERAPIST


HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License Number: PT292613
NPI: 1003354895

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
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Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST



HERMES, MARY


Provider ID: 206360
Provider Gender: Female
License Number: PT24707
NPI: 1518028547

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
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515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST



HERMES, MARY

Provider ID: 206360
Provider Gender: Female
License Number: PT24707
NPI: 1518028547

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Board Certified Specialty: No

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


REGISTERED PHYSICAL THERAPIST

IRIZARRY, NICOLE


Provider ID: 206360


D2. 初級保健名錄


Provider Gender: Female
License Number: PT33914
NPI: 1003088063

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 1809 NATIONAL AVE
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 Phone: (619) 515-2300


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Min/Max Age: 0\150

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 Accessibility: CONTACT
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REGISTERED PHYSICAL THERAPIST


IRIZARRY, NICOLE

Provider ID: 206360


Provider Gender: Female


License Number: PT33914


NPI: 1003088063

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


MAHONEY, KAITLYN

Provider ID: 417937


Provider Gender: Female


License Number: PT296559


NPI: 1114583176

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

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515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST


MAHONEY, KAITLYN

Provider ID: 417937


Provider Gender: Female

License Number: PT296559


NPI: 1114583176

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST


MIGNEA, DAVID

Provider ID: 417937


Provider Gender: Male


License Number: PT293536


NPI: 1043736879

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

D2. 初級保健名錄

Provider ID: 417937
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN
Provider ID: 417937
Provider Gender: Male
License Number: PT28061
NPI: 1780685032
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN
Provider ID: 417937
Provider Gender: Male
License Number: PT28061
NPI: 1780685032
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
Provider ID: 417937
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
 Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
Provider ID: 417937
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4094 4TH AVE
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 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

RHEUMATOLOGY


OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: JOHN


MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY


OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: JOHN


MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY


REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

 4725 MARKET ST

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 Phone: (619) 515-2560

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515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM



RHEUMATOLOGY


REDDY, DANA

Provider ID: 403583
Provider Gender: Female
License Number: A115598
NPI: 1144538778


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ENCINITAS

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
 *After Hours Phone: (619) 233-8500*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY


REDDY, DANA

Provider ID: 206363
Provider Gender: Female
License Number: A115598
NPI: 1144538778


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ENCINITAS

Board Certified Specialty: No

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

SPEECH PATHOLOGIST

WILLIAMS, JESSICA


Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


SAN MARCOS

CERTIFIED NURSE





PRACTITIONER

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

 *Provider English Spoken: Y*

D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166



 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
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 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166








 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
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 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
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CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE **PRACTITIONER**

BINETTE, DONYA

Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

 *Provider English Spoken: Y*

D2. 初級保健名錄

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No*
 150 VALPRED A RD
SAN MARCOS, CA 92069
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 *After Hours Phone: (760)
736-6767*
 *Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

*Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No*
 150 VALPRED A RD
SAN MARCOS, CA 92069
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 *After Hours Phone: (760)
736-6767*
 *Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*






CERTIFIED NURSE PRACTITIONER



DOAN, CHINH

*Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No*
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Min/Max Age: 0\150
American Sign Language (ASL):
N*
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PROVIDER*

CERTIFIED NURSE PRACTITIONER


DOAN, CHINH

*Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No*
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CERTIFIED NURSE PRACTITIONER

DOAN, CHINH




*Provider ID: 206426
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CERTIFIED NURSE PRACTITIONER

DOAN, CHINH

*Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069*
 *Provider English Spoken: Y*

D2. 初級保健名錄

 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*





CERTIFIED NURSE PRACTITIONER




FODDA, RAMI

Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-6744
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER








FODDA, RAMI

Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
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 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
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Fax: (760) 736-6744

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

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Cultural Competency: N
Board Certified Specialty: No
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American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


FODDA, RAMI

Provider ID: 614511
Provider Gender: Male

D2. 初級保健名錄

License Number: NP18788

NPI: 1164660452


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

 1595 GRAND AVE STE 106
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Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


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SAN MARCOS, CA 92069

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

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Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903


NPI: 1659504264


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903


NPI: 1659504264


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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PROVIDER

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903


D2. 初級保健名錄


NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

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American Sign Language (ASL):
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PROVIDER

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645


 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

 Provider English Spoken: Y
 Provider Language(s)





Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

D2. 初級保健名錄

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545

NPI: 1538319645
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPREDA RD
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 Website: www.ihpsocal.org
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CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

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PROVIDER

CERTIFIED NURSE

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL



D2. 初級保健名錄

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

KOUSARI, JHALEH



Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No





 150 VALPRED A RD
SAN MARCOS, CA 92069
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 Website: www.ihpsocal.org
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Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE **PRACTITIONER**

KOUSARI, JHALEH



Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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SAN MARCOS, CA 92069
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American Sign Language (ASL):
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PROVIDER





CERTIFIED NURSE **PRACTITIONER**

KOUSARI, JHALEH

Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS



MEMORIAL HOSPITAL

Board Certified Specialty: No






 150 VALPRED A RD
SAN MARCOS, CA 92069
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736-6767
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PROVIDER

CERTIFIED NURSE **PRACTITIONER**

KOUSARI, JHALEH

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Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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SAN MARCOS, CA 92069
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Min/Max Age: 0\150
American Sign Language (ASL):
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 *Accessibility: CONTACT*
PROVIDER

D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER


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Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

American Sign Language (ASL):

N

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PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

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CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER **MACIAS, ALISSA**


D2. 初級保健名錄

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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PROVIDER

Hours: M-F 8:00AM-5:00PM

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D2. 初級保健名錄

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469


Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426

Provider Gender: Female

License Number: NM235997

NPI: 1801134275

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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Min/Max Age: 0\150

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KELLY, KATHERINE

Provider ID: 206426

Provider Gender: Female

License Number: NM235997

NPI: 1801134275

Provider English Spoken: Y

Provider Language(s)
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Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD

D2. 初級保健名錄

SAN MARCOS, CA 92069
Phone: (760) 736-6767
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Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

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NPI: 1801134275
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Provider Language(s)
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Cultural Competency: N
Hospital Affiliation: PALOMAR
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Board Certified Specialty: No

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N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426
Provider Gender: Female
License Number: 20A15159

D2. 初級保健名錄

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426

Provider Gender: Female

License Number: 20A15159

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Accessibility: CONTACT
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FAMILY PRACTICE

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Provider ID: 206426

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License Number: 20A15159

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)
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Board Certified Specialty: No

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Provider English Spoken: Y

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Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

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Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

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Min/Max Age: 0\150

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Accessibility: CONTACT
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Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426

Provider Gender: Male

License Number: C54157

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Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 206426


Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y



D2. 初級保健名錄

 *Provider Language(s)
Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No*


 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)
736-6767*
 *Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM*

FAMILY PRACTICE

NATH, DEVARSHI

*Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618*
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Bengali*
Cultural Competency: N

Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
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736-6767*
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*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150*

*American Sign Language (ASL):
N*
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PROVIDER*




*Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM*

FAMILY PRACTICE

NATH, DEVARSHI

*Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618*



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Bengali*
Cultural Competency: N
Board Certified Specialty: No
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*
 *Website: www.ihpsocal.org*
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*





FAMILY PRACTICE

NATH, DEVARSHI

*Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Bengali*
Cultural Competency: N




Board Certified Specialty: No
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078



 *Phone: (760) 736-6767*
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American Sign Language (ASL):
N*
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FAMILY PRACTICE

NATH, DEVARSHI

*Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Bengali*
Cultural Competency: N
Board Certified Specialty: No
 1595 GRAND AVE STE 106
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American Sign Language (ASL):
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FAMILY PRACTICE

NATH, DEVARSHI

*Provider ID: 614511
Provider Gender: Male
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D2. 初級保健名錄

NPI: 1275630618

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Cultural Competency: N

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Min/Max Age: 0\999

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562

NPI: 1659563641

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

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After Hours Phone: (760)
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

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FAMILY PRACTICE

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Provider ID: 206426

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FAMILY PRACTICE

SAFI, ROOZCHEHR

Provider ID: 206426

Provider Gender: Female

License Number: A116562




NPI: 1659563641


Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No

 150 VALPRED A RD
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N

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PROVIDER




FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese

Cultural Competency: N
Board Certified Specialty: No

 150 VALPRED A RD
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American Sign Language (ASL):
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FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767

Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese

Cultural Competency: N
Board Certified Specialty: No

 150 VALPRED A RD
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D2. 初級保健名錄

 After Hours Phone: (760)
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767


Provider English Spoken: Y


Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Board Certified Specialty: No

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Provider ID: 206426

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Provider Language(s)


Spoken: Portuguese

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 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767


Provider English Spoken: Y


Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

WILLIE, KADEN

Provider ID: 206426

Provider Gender: Male

License Number: 20A17306

NPI: 1790133767


Provider English Spoken: Y


Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1598484255

Provider English Spoken: Y
Cultural Competency: N

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 206426

NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC


TRUECARE,

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NPI: 1598484255

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Cultural Competency: N

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TRUECARE,

Provider ID: 206426


NPI: 1245246917

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Cultural Competency: N

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): *Medi-Cal Open Panel: Yes*
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
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FQHC


TRUECARE,

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FQHC


TRUECARE,

Provider ID: 614511

NPI: 1598484255

 *Provider English Spoken: Y*
Cultural Competency: N

 1595 GRAND AVE STE 106
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American Sign Language (ASL): *American Sign Language (ASL):*
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Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Polish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

D2. 初級保健名錄

ENCINITAS

Board Certified Specialty: No

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

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License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s) Spoken: Polish

Cultural Competency: N

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Accessibility: CONTACT PROVIDER

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Provider ID: 206426

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Provider English Spoken: Y

Provider Language(s) Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

D2. 初級保健名錄

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s)
Spoken: Polish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
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Provider Gender: Male

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PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

D2. 初級保健名錄

License Number: G74757

NPI: 1467485078


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

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PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

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Provider Language(s)
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Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
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 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




OBSTETRICS / GYNECOLOGY


MOSTOFIAN, EIMANEH

Provider ID: 206426
Provider Gender: Female
License Number: A97181
NPI: 1154477628


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 *150 VALPREDA RD*
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OBSTETRICS / GYNECOLOGY


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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426
Provider Gender: Female
License Number: A93248
NPI: 1174703680

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426
Provider Gender: Female

D2. 初級保健名錄

License Number: A93248

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Provider English Spoken: Y

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Hospital Affiliation: TRI CITY
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POUNTNEY, MARLENE

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MEDICAL CENTER

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MEDICAL CENTER

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D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


SCHWEIKERT, SUZANNE

Provider ID: 206426

Provider Gender: Female

License Number: A60958

NPI: 1477560142

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP


MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS,

PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


SCHWEIKERT, SUZANNE

Provider ID: 206426

Provider Gender: Female

License Number: A60958

NPI: 1477560142

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

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OBSTETRICS / GYNECOLOGY


SCHWEIKERT, SUZANNE


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SCHWEIKERT, SUZANNE


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Hospital Affiliation: SHARP

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WOMEN AND NEWBORNS,

PALOMAR MEDICAL CENTER



Board Certified Specialty: No

 150 VALPRED A RD
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 Phone: (760) 736-6767








 After Hours Phone: (760)

D2. 初級保健名錄

736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY








SCHWEIKERT, SUZANNE

Provider ID: 206426
Provider Gender: Female
License Number: A60958
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 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
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PALOMAR MEDICAL CENTER
Board Certified Specialty: No
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OBSTETRICS / GYNECOLOGY







SCHWEIKERT, SUZANNE

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N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PEDIATRICS







MALHOTRA, ARATI

Provider ID: 206426
Provider Gender: Female
License Number: A63903
NPI: 1215135306
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426
Provider Gender: Female
License Number: A63903
NPI: 1215135306
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
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736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): Cultural Competency: N
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306


Provider English Spoken: Y


Provider Language(s)
Spoken: Hindi, Spanish

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

PEDIATRICS

MALHOTRA, ARATI

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Provider Language(s)
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Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR
MEDICAL CENTER

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PEDIATRICS

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Provider Language(s)
Spoken: Hindi, Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

Provider English Spoken: Y






Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No



 150 VALPRED A RD
SAN MARCOS, CA 92069







D2. 初級保健名錄

 Phone: (760) 736-6767
 Fax: (760) 736-6797
 After Hours Phone: (760) 736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS



MONAHAN, CAROLYN

Provider ID: 50425
Provider Gender: Female
NPI: 1619973666
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: Yes

 1582 W SAN MARCOS BLVD
STE 203
SAN MARCOS, CA 92078
 Phone: (760) 744-6710
 Fax: (760) 744-6156
 After Hours Phone: (760) 744-6710
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS



POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO



Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No






 150 VALPRED A RD

SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

D2. 初級保健名錄

Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)

736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 303661
Provider Gender: Male
NPI: 1720093198

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM


PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 614767
Provider Gender: Female
NPI: 1023033156
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D2. 初級保健名錄

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-5:00PM

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 150 VALPRED A RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

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Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
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Min/Max Age: 0\150

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

D2. 初級保健名錄

NPI: 1740295229

- ☐ Provider English Spoken: Y
- ☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

- 📍 150 VALPRED A RD
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- 🕒 After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

- ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

- ☐ Provider English Spoken: Y
- ☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

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- 🕒 After Hours Phone: (760)

736-6767

- 🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

- ♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

- ☐ Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No

- 📍 1582 W SAN MARCOS BLVD
STE 203
SAN MARCOS, CA 92078
- ☎ Phone: (760) 744-6710
- Fax: (760) 744-6156

🕒 After Hours Phone: (760) 744-6710

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

- ♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:45PM

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

- ☐ Provider English Spoken: Y

- ☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No

- 📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
- ☎ Phone: (760) 736-6767
- 🕒 After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

- ♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

- ☐ Provider English Spoken: Y
- ☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No


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- ☎ Phone: (760) 736-6767
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

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Provider Gender: Female

License Number: PA17718

NPI: 1821237678

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Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR

MEDICAL CENTER

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Min/Max Age: 0\999

American Sign Language (ASL):

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 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

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Provider ID: 614511

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License Number: PA17718

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Cultural Competency: N


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 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY

Provider ID: 206426

Provider Gender: Male

License Number: PA19825


NPI: 1750474177


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): *Medi-Cal Open Panel: Yes*
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

BLAKESPEAR, JEREMY

Provider ID: 206426

Provider Gender: Male


License Number: PA19825


NPI: 1750474177


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
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 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
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 *Accessibility: CONTACT PROVIDER*

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:

D2. 初級保健名錄

GROSSMONT HOSPITAL
Board Certified Specialty: No
150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
150 VALPRED A RD
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Phone: (760) 736-6767
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
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PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male
License Number: PA22667
NPI: 1174964001
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Cultural Competency: N
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GROSSMONT HOSPITAL
Board Certified Specialty: No
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NPI: 1174964001
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Hospital Affiliation:
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Board Certified Specialty: No
150 VALPRED A RD
SAN MARCOS, CA 92069

D2. 初級保健名錄

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male



License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

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License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Board Certified Specialty: No

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PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

D2. 初級保健名錄


License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD

D2. 初級保健名錄

SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

📍 150 VALPREDA RD
SAN MARCOS, CA 92069
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female
License Number: PA21723
NPI: 1518133032

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

📍 150 VALPREDA RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

📍 150 VALPREDA RD
SAN MARCOS, CA 92069
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Board Certified Specialty: No

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SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
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D2. 初級保健名錄

736-6767
 Website: www.ihpsocal.org
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American Sign Language (ASL):
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PHYSICIANS ASSISTANT



SPENCE, JAMIE

Provider ID: 206426
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Provider English Spoken: Y
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Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

 150 VALPREDA RD
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




PHYSICIANS ASSISTANT



TAHRIRI, BAHAREH

Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387

Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N

Board Certified Specialty: No

 150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
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Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT



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D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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 Accessibility: CONTACT PROVIDER

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Board Certified Specialty: No

 150 VALPRED A RD

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 Phone: (760) 736-6767

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Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No



150 VALPRED A RD

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736-6767



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150 VALPRED A RD

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American Sign Language (ASL):

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 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)

Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/san-ysidro-health

-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA



Provider ID: 206292

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License Number: C52581

NPI: 1053300251

D2. 初級保健名錄


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE


PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE


PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


CELIZ, ADRIANA

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


CELIZ, ADRIANA


Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish




Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


D2. 初級保健名錄






 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHAUSSE CASTRO, EKATERINA




Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



CHAUSSE CASTRO, EKATERINA




Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center






Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 4004 BEYER BLVD
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 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174


D2. 初級保健名錄


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO


Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292

Provider Gender: Male


License Number: NP95003024


NPI: 1215304860


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292

Provider Gender: Male


License Number: NP95003024

NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA


Provider ID: 206292

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

D2. 初級保健名錄

SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

IBARRA, MARTHA

Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KANTAS, PARIS

Provider ID: 206292

Provider Gender: Male

License Number: NP18661

NPI: 1114329612

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

D2. 初級保健名錄

PRACTITIONER

KANTAS, PARIS

Provider ID: 206292

Provider Gender: Male


License Number: NP18661


NPI: 1114329612


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469

Provider Gender: Female


License Number: NP95019995

NPI: 1265019061

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469

Provider Gender: Female


License Number: NP95019995


NPI: 1265019061


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
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 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


PITTMAN, LILIANA

Provider ID: 227469

Provider Gender: Female


License Number: NP95017732


NPI: 1326599002


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469

Provider Gender: Female


License Number: NP95017732


NPI: 1326599002

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

CERTIFIED NURSE

PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469

Provider Gender: Female


License Number: NP95003721


NPI: 1548614506

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SANCHEZ, MYRNA

Provider ID: 227469

Provider Gender: Female


License Number: NP95003721


NPI: 1548614506

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469

Provider Gender: Female


License Number: NP95001960


NPI: 1669865960

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469

Provider Gender: Female


License Number: NP95001960


NPI: 1669865960


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR


OCHOA, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




CHIROPRACTOR



OCHOA, RAUL

D2. 初級保健名錄


Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**



CRUZ, MICHAEL
Provider ID: 206292
Provider Gender: Male
License Number: A138772
NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




ENDOCRINOLOGY **METABOLISM DIABETES**

CRUZ, MICHAEL
Provider ID: 206292
Provider Gender: Male
License Number: A138772
NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
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 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE **ALGHAMDI, ASMA**

Provider ID: 227469
Provider Gender: Female
License Number: A167529
NPI: 1316310840
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE **ALGHAMDI, ASMA**

Provider ID: 227469
Provider Gender: Female
License Number: A167529
NPI: 1316310840
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER		
<u>FAMILY PRACTICE</u> ALVAREZ-ESTRADA, MIGUEL Provider ID: 206292 Provider Gender: Male License Number: A157505 NPI: 1588197826 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL Board Certified Specialty: No <input type="checkbox"/> 4004 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org/clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL Board Certified Specialty: No <input type="checkbox"/> 4050 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:00PM	SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org/clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER
<u>FAMILY PRACTICE</u> ALVAREZ-ESTRADA, MIGUEL Provider ID: 227411 Provider Gender: Male License Number: A157505 NPI: 1588197826 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL Board Certified Specialty: No <input type="checkbox"/> 4050 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	<u>FAMILY PRACTICE</u> ALVAREZ-ESTRADA, MIGUEL Provider ID: 206292 Provider Gender: Male License Number: A157505 NPI: 1588197826 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL Board Certified Specialty: No <input type="checkbox"/> 4004 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: www.syhealth.org/clinics/san-ysidro-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER	<u>FAMILY PRACTICE</u> ALVAREZ-ESTRADA, MIGUEL Provider ID: 227411 Provider Gender: Male License Number: A157505 NPI: 1588197826 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL Board Certified Specialty: No <input type="checkbox"/> 4050 BEYER BLVD SAN YSIDRO, CA 92173 <input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100 <input type="checkbox"/> Website: syhealth.org/clinics/maternal-child-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER



D2. 初級保健名錄

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM





FAMILY PRACTICE

ARRIETA, NOEMI


Provider ID: 206292
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


ARRIETA, NOEMI

Provider ID: 206292
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


BAUM, PETER

Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM





FAMILY PRACTICE

BAUM, PETER


Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N








 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255


D2. 初級保健名錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Romanian
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


BORSAN, COSMIN





Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Romanian
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE







CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO CENICEROS, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A78373

NPI: 1295746618


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292

Provider Gender: Female

License Number: A159673


NPI: 1902330723


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292

Provider Gender: Female

License Number: A159673


NPI: 1902330723


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292

Provider Gender: Male

License Number: A55469

NPI: 1720181829





Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 227411

Provider Gender: Female

License Number: A112627





NPI: 1710147566

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 206292

Provider Gender: Female

License Number: A112627





NPI: 1710147566

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 206292

Provider Gender: Female

License Number: A112627



NPI: 1710147566

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 Phone: (619) 662-4100
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662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 227411

Provider Gender: Female

License Number: A112627





NPI: 1710147566

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292

Provider Gender: Female

License Number: A112511

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292

Provider Gender: Female

License Number: A112511

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS GREEN


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SCRIPPS GREEN


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

D2. 初級保健名錄

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 227469

Provider Gender: Male

License Number: A32571

NPI: 1235142738


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

HENDRIX, JEFFERSON

Provider ID: 227469

Provider Gender: Male

License Number: A32571

NPI: 1235142738


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 227469

Provider Gender: Male

License Number: C42207


NPI: 1285782151


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)



D2. 初級保健名錄

662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH


Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH



Provider ID: 206292
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 206292
Provider Gender: Male
License Number: C42207
NPI: 1285782151



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



KAUFHOLD, ANNE

Provider ID: 206292
Provider Gender: Female
License Number: A88893
NPI: 1164508073
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 206292
Provider Gender: Female
License Number: A88893
NPI: 1164508073
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No

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SAN YSIDRO, CA 92173


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662-4100


Website: www.syhealth.org/clinics/san-ysidro-health-center






D2. 初級保健名錄

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469
Provider Gender: Male
License Number: A164201
NPI: 1417480948
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST
ELIZABETH HOSP


Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LEE, JOSEPH



Provider ID: 227469
Provider Gender: Male
License Number: A164201

NPI: 1417480948
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST
ELIZABETH HOSP
Board Certified Specialty: No
 3364 BEYER BLVD
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 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LEPEZ, DAVID



Provider ID: 206292
Provider Gender: Male
License Number: A130348
NPI: 1205196029
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID

Provider ID: 206292
Provider Gender: Male
License Number: A130348
NPI: 1205196029
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 206292
Provider Gender: Male

D2. 初級保健名錄

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 206292

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

MOYA, MARY

Provider ID: 206292

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

[/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MOYA, MARY

Provider ID: 206292

Provider Gender: Female

License Number: A80185

NPI: 1093844417

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

4004 BEYER BLVD
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Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227469

D2. 初級保健名錄

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR

Board Certified Specialty: No

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR

Board Certified Specialty: No

 3364 BEYER BLVD

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 After Hours Phone: (619)
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 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

D2. 初級保健名錄

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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SAN YSIDRO, CA 92173

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Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

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SAN YSIDRO, CA 92173

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After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL



Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100







After Hours Phone: (619)


D2. 初級保健名錄



662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292
Provider Gender: Male
License Number: A156607
NPI: 1356761571
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
Provider ID: 206292
Provider Gender: Female
License Number: A178949
NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






Provider Gender: Female
License Number: A178949
NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE







ORTIZ ILIZALITURRI, ANA

Provider ID: 227411
Provider Gender: Female
License Number: A178949
NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


ORTIZ ILIZALITURRI, ANA

Provider ID: 206292
Provider Gender: Female
License Number: A178949
NPI: 1316407026
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. 初級保健名錄

American Sign Language (ASL): NPI: 1508286709

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ORTIZ ILIZALITURRI, ANA

Provider ID: 227411

Provider Gender: Female

License Number: A178949

NPI: 1316407026

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA


Board Certified Specialty: No

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1508286709

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM


FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 206292

Provider Gender: Female

License Number: A145480

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


RAJAIPOUR, NEGIN


Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP

Board Certified Specialty: No

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

D2. 初級保健名錄

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Hospital Affiliation: CHULA


VISTA COMM HOSP

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292

Provider Gender: Male


License Number: 20A7435


NPI: 1356556021


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7435


NPI: 1356556021


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982


NPI: 1801230297


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. 初級保健名錄

PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
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 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292


Provider Gender: Male


License Number: A158364


NPI: 1245401298


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292

Provider Gender: Male


License Number: A158364


NPI: 1245401298


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292

Provider Gender: Male

License Number: 20A11087


NPI: 1972751089


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org


D2. 初級保健名錄

/clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN


Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org /clinics/san- ysidro- health - center](http://www.syhealth.org/clinics/san- ysidro- health - center)


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER



Provider ID: 206292
Provider Gender: Male
License Number: 20A7502

NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org /clinics/san- ysidro- health - center](http://www.syhealth.org/clinics/san- ysidro- health - center)

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE




SNYDER, CHRISTOPHER

Provider ID: 206292
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
Hospital - Downey, JOHN F

KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org /clinics/san- ysidro- health - center](http://www.syhealth.org/clinics/san- ysidro- health - center)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

STALEY, MICHAELA

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org /clinics/san- ysidro- health - center](http://www.syhealth.org/clinics/san- ysidro- health - center)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

STALEY, MICHAELA

Provider ID: 206292


Provider Gender: Female


License Number: A157772


NPI: 1912438250


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292

Provider Gender: Male

License Number: A101827

NPI: 1457407702

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS


MERCY HOSPITAL CHULA VISTA, GROSSMONT


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

SWEET, PATRICK

Provider ID: 206292

Provider Gender: Male

License Number: A101827

NPI: 1457407702

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS

MERCY HOSPITAL CHULA VISTA, GROSSMONT


HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR,


SHARP CORONADO HOSP


AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

D2. 初級保健名錄

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE


TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE


TREJO, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: A77936

NPI: 1174534184


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TREJO, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: A77936

NPI: 1174534184


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

[/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292

Provider Gender: Male

License Number: A183145


NPI: 1194353094


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292


Provider Gender: Male

License Number: A183145

NPI: 1194353094

 Provider English Spoken: Y

D2. 初級保健名錄

 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE




VAN HOLLEBEKE, RACHEL


Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

*American Sign Language (ASL): License Number: A71304
NPI: 1972732584*



 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

FAMILY PRACTICE




VAN HOLLEBEKE, RACHEL


Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

*American Sign Language (ASL):
N*



 *Accessibility: CONTACT
PROVIDER*

*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*




FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 206292
Provider Gender: Female

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

FAMILY PRACTICE



VELASQUEZ, SHARON

Provider ID: 206292
Provider Gender: Female
License Number: A71304
NPI: 1972732584



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*

D2. 初級保健名錄

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411

NPI: 1558852947


 Provider English Spoken: Y
Cultural Competency: N

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR,

Provider ID: 227411


NPI: 1558852947


 Provider English Spoken: Y
Cultural Competency: N

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1967

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292


NPI: 1952364747


 Provider English Spoken: Y
Cultural Competency: N

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FQHC


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292

NPI: 1952364747


 Provider English Spoken: Y
Cultural Competency: N

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FQHC


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

 Provider English Spoken: Y
Cultural Competency: N

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhe>


D2. 初級保健名錄

alth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC



SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469
NPI: 1801438239
 Provider English Spoken: Y
Cultural Competency: N
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292
Provider Gender: Male
License Number: A181644
NPI: 1356929111
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish





Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292
Provider Gender: Male
License Number: A181644
NPI: 1356929111
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE

TEJEDA, FRANCISCO

Provider ID: 206292
Provider Gender: Male
License Number: A66885
NPI: 1407940075
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

TEJEDA, FRANCISCO

Provider ID: 206292
Provider Gender: Male

D2. 初級保健名錄


License Number: A66885


NPI: 1407940075


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, PARADISE VALLEY


HOSPITAL, LOMPOC VALLEY


MEDICAL CENTER

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, PARADISE VALLEY


HOSPITAL, LOMPOC VALLEY


MEDICAL CENTER

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292

Provider Gender: Female

License Number: A131952

NPI: 1306280607

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR, SCRIPPS MEMORIAL


HOSPITAL, PALOMAR


MEDICAL CENTER

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 206292


Provider Gender: Female

License Number: A131952

NPI: 1306280607


Provider English Spoken: Y


D2. 初級保健名錄


 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

INTERNAL MEDICINE


ALDOUS, JEANNETTE


Provider ID: 206292

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


ALDOUS, JEANNETTE


Provider ID: 206292

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

CARPENTER, ROBERT

Provider ID: 206292

Provider Gender: Male


License Number: 20A10964


NPI: 1356343040


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

INTERNAL MEDICINE

CARPENTER, ROBERT

Provider ID: 206292

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No





 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. 初級保健名錄

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

CHEN, TSUH YIN







Provider ID: 206292
Provider Gender: Female
License Number: C55563
NPI: 1093803520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH YIN

Provider ID: 206292
Provider Gender: Female
License Number: C55563
NPI: 1093803520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center







Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS

D2. 初級保健名錄

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DE LA ROSA, JOSE

Provider ID: 206292

Provider Gender: Male



License Number: A49267


NPI: 1689646572

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708





 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, CHULA VISTA
COMM HOSP

CHULA VISTA, CHULA VISTA
COMM HOSP

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, CHULA VISTA

COMM HOSP
Board Certified Specialty: No







 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center


D2. 初級保健名錄

enter
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



HURST, MICHAEL




Provider ID: 206292
Provider Gender: Male
License Number: 20A8081
NPI: 1205893104
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

HURST, MICHAEL

Provider ID: 206292
Provider Gender: Male
License Number: 20A8081
NPI: 1205893104
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,
SCRIPPS MEMORIAL
HOSPITAL





Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE







KAUFER, DAVID

Provider ID: 206292
Provider Gender: Male
License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292
Provider Gender: Male
License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

D2. 初級保健名錄

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD


SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

D2. 初級保健名錄

/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 206292





Provider Gender: Female
License Number: A160493
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA



Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE







SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/san-ysidro-health
-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292
Provider Gender: Female

D2. 初級保健名錄

License Number: G81461
NPI: 1821299520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292

Provider Gender: Female

License Number: G81461

NPI: 1821299520

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA

Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA

Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469

Provider Gender: Male

License Number: A51843

NPI: 1982617403

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS


D2. 初級保健名錄

MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


SY, RAMON


Provider ID: 227469

Provider Gender: Male

License Number: A51843

NPI: 1982617403

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

D2. 初級保健名錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411


Provider Gender: Male


License Number: 20A12555

NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY



MOUSSAVIAN, MEHRAN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY



MOUSSAVIAN, MEHRAN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7241

NPI: 1689788234

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP


MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543





NPI: 1912159674

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS,

D2. 初級保健名錄

SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543




NPI: 1912159674

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

 4050 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411

Provider Gender: Female

License Number: A104660



NPI: 1083815823


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ST

JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No

 4004 BEYER BLVD


SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292

Provider Gender: Female

License Number: A104660

NPI: 1083815823

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST

JOSEPHS MEDICAL CENTER,

D2. 初級保健名錄

SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
 Provider Gender: Female
 License Number: A104660
 NPI: 1083815823
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: ST
 JOSEPHS MEDICAL CENTER,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL
 Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292
 Provider Gender: Female
 License Number: A72235
 NPI: 1245229129
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No

4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

CARSON, LATISA

Provider ID: 206292
 Provider Gender: Female
 License Number: A72235
 NPI: 1245229129
 Provider English Spoken: Y

Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM


Provider ID: 227411
 Provider Gender: Male
 License Number: A63844
 NPI: 1891867412
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, GROSSMONT
 HOSPITAL, SHARP MEMORIAL
 HOSPITAL, SCRIPPS
 MEMORIAL HOSPITAL
 ENCINITAS, SCRIPPS
 MEMORIAL HOSPITAL, TRI
 CITY MEDICAL CTR, SHARP
 MARY BIRCH HOSP FOR

D2. 初級保健名錄

WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, SCRIPPS GREEN


HOSPITAL, SCRIPPS MERCY


HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, SCRIPPS GREEN


HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y


Provider Language(s)

D2. 初級保健名錄

Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948


 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY **DINH, MY**

Provider ID: 206292


Provider Gender: Female


License Number: 20A9907


NPI: 1316146996


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY **DINH, MY**

Provider ID: 227411

Provider Gender: Female


License Number: 20A9907


NPI: 1316146996


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PROVIDER

OBSTETRICS / GYNECOLOGY **DINH, MY**

Provider ID: 227411


Provider Gender: Female


License Number: 20A9907


NPI: 1316146996


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY **DINH, MY**

Provider ID: 206292

Provider Gender: Female


License Number: 20A9907


NPI: 1316146996


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

D2. 初級保健名錄

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS


MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS


MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


 4050 BEYER BLVD

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Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006


NPI: 1255878997


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006


NPI: 1255878997


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA

Provider ID: 206292

Provider Gender: Female

License Number: A175006


NPI: 1255878997


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

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 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY


JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MAJERSKI GONZALEZ,

MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914

NPI: 1982812392

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA


MED CTR


D2. 初級保健名錄

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

MAJERSKI GONZALEZ,

MANDY

Provider ID: 227411

Provider Gender: Female


License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  Accessibility: CONTACT
PROVIDER

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


MENDEZ, DIEGO


Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
GENERAL HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, KERN
MEDICAL CENTER

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
GENERAL HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, KERN
MEDICAL CENTER

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PARADISE


VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PARADISE


VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY



MANI, NASRIN

Provider ID: 227469

Provider Gender: Female

License Number: A40473

NPI: 1023061314


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY



MANI, NASRIN

Provider ID: 227469

Provider Gender: Female

License Number: A40473

NPI: 1023061314


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY



SKAF, AYHAM

Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY



SKAF, AYHAM

Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411


Provider Gender: Female


License Number: A74960


NPI: 1801971569


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female


License Number: A74960


NPI: 1801971569

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100



Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 227411

Provider Gender: Male

License Number: A49307

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 206292

Provider Gender: Male

License Number: A49307

NPI: 1982662193

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N

Hospital Affiliation: SHARP




CHULA VISTA MED CTR

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

D2. 初級保健名錄

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM





PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

PEDIATRICS

CABARLO, JEHRIB

Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB





Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

PEDIATRICS

Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411
Provider Gender: Female
License Number: A138938
NPI: 1134567530
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA

D2. 初級保健名錄

MED CTR, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, HOLLYWOOD

PRESBYTERIAN MED CTR,

SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS

NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

License Number: A64487



NPI: 1396705299

Provider English Spoken: Y


Provider Language(s)

D2. 初級保健名錄

Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM


PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 206292
Provider Gender: Female
License Number: A93785
NPI: 1669680351
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA



Board Certified Specialty: No
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 206292
Provider Gender: Female
License Number: A93785
NPI: 1669680351
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san- ysidro- health - center*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT*

PROVIDER





PEDIATRICS

RODRIGUEZ, ALDO


Provider ID: 227411
Provider Gender: Male
License Number: A134995
NPI: 1508209651
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Portuguese, Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: syhealth.org/clinics/maternal- child- health- center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 227411
Provider Gender: Male
License Number: A134995
NPI: 1508209651
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Portuguese, Spanish*
Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

4050 BEYER BLVD
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Phone: (619) 662-4100
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662-4100
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)

662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM
SA 8:30AM-2:00PM

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM
SA 8:30AM-2:00PM

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female


License Number: A94813


NPI: 1891924858


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411


Provider Gender: Female


License Number: A94813


NPI: 1891924858


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female


License Number: A169577


NPI: 1790216422

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center





D2. 初級保健名錄

s/maternal- child- health- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

PEDIATRICS

SULLIVAN, ELISSA








Provider ID: 227411
Provider Gender: Female
License Number: A169577
NPI: 1790216422
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: *syhealth.org/clinics/maternal- child- health- center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

PEDIATRICS






TAYLOR, TASHA



Provider ID: 227411
Provider Gender: Female
License Number: A82187
NPI: 1528144433

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: *syhealth.org/clinics/maternal- child- health- center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS





TAYLOR, TASHA



Provider ID: 227411
Provider Gender: Female
License Number: A82187
NPI: 1528144433
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
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 Website: *syhealth.org/clinics/maternal- child- health- center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BUCKNER, JOSEPH

Provider ID: 206292
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: *www.syhealth.org/clinics/san- ysidro- health- center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT


BUCKNER, JOSEPH

Provider ID: 206292
Provider Gender: Male
License Number: PA18363
NPI: 1215909205
 Provider English Spoken: Y
Cultural Competency: N

D2. 初級保健名錄

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 206292

Provider Gender: Male

License Number: PA16994




NPI: 1023207404


Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

GI, HUNG

Provider ID: 206292

Provider Gender: Male

License Number: PA16994




NPI: 1023207404


Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469

Provider Gender: Female

License Number: PA58672

NPI: 1013516996

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: <https://www.syhe>

alth.org/locations

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469

Provider Gender: Female


License Number: PA58672

NPI: 1013516996

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459


Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162


NPI: 1447326459

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE

Provider ID: 227411





Provider Gender: Female

License Number: PA16269

NPI: 1053403782

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PORTO MADURSKI, KRISTINE

Provider ID: 227411





Provider Gender: Female

License Number: PA16269

NPI: 1053403782

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

enter

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN


Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

 Provider English Spoken: Y

 Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292

Provider Gender: Female


License Number: PA20490

NPI: 1619100237

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 206292



Provider Gender: Female


License Number: PA20490


NPI: 1619100237

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

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 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292



Provider Gender: Male


License Number: PA12304


NPI: 1902016611

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

SUNA SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855





NPI: 1497196729

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173


D2. 初級保健名錄

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA SITTO, MOHEEN


Provider ID: 227469
Provider Gender: Female
License Number: PA22855
NPI: 1497196729




 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT




TRUJILLO, MIGUEL


Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT








TRUJILLO, MIGUEL

Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
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 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

D2. 初級保健名錄

CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1457089187

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 206292

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

CLARK, SKYLAR

Provider ID: 227469

Provider Gender: Female

License Number: PT302385

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CLARK, SKYLAR

Provider ID: 227469

Provider Gender: Female

License Number: PT302385

NPI: 1457089187

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

TORRES, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607


NPI: 1134732522


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

TORRES, JOANN

Provider ID: 206292

Provider Gender: Female

License Number: PT296607


NPI: 1134732522

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075


NPI: 1043950751


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

HILL, CARLA

Provider ID: 206292

Provider Gender: Female


License Number: SP9075


NPI: 1043950751


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: Providence


St Mary Medical Center

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. 初級保健名錄

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

SANTEE

PEDIATRICS

ARLATA, TAMANTHA

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No

9600 CUYAMACA ST STE
101

SANTEE, CA 92071

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619)
749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No

9600 CUYAMACA ST STE
101

SANTEE, CA 92071

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619)
749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SPRING VALLEY

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206361

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

D2. 初級保健名錄

Provider ID: 206361

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206361

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 206361

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A15459


NPI: 1225442643


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A15459


NPI: 1225442643


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361

Provider Gender: Male

D2. 初級保健名錄

License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CONSTANTINO, STEPHANIE

Provider ID: 206361
Provider Gender: Female
License Number: A149063
NPI: 1366824971
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE

CONSTANTINO, STEPHANIE

Provider ID: 206361
Provider Gender: Female
License Number: A149063
NPI: 1366824971
 Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361
Provider Gender: Female
License Number: A76059
NPI: 1588677314
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. 初級保健名錄

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female


License Number: A76059

NPI: 1588677314

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC,


Provider ID: 206361

NPI: 1508801069

 *Provider English Spoken: Y*
Cultural Competency: N

 8788 JAMACHA RD

SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

Fax: (619) 462-5584

 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FQHC

GROSSMONT SPRING VALLEY


FAMILY HLTH CTRS INC,

Provider ID: 206361

NPI: 1508801069

 *Provider English Spoken: Y*
Cultural Competency: N

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

Fax: (619) 462-5584

 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 *Phone: (619) 515-2555*

 *After Hours Phone: (619) 515-2555*

 *Website: www.fhcsd.org*

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206361

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD

D2. 初級保健名錄

SPRING VALLEY, CA 91977
☎ Phone: (619) 515-2555
🕒 After Hours Phone: (619) 515-2555
🌐 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361
Provider Gender: Female
License Number: A68463
NPI: 1376663831
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS
Board Certified Specialty: No
📍 8788 JAMACHA RD
SPRING VALLEY, CA 91977
☎ Phone: (619) 515-2555
🕒 After Hours Phone: (619) 515-2555
🌐 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361
Provider Gender: Female
License Number: A68463
NPI: 1376663831
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
📍 8788 JAMACHA RD
SPRING VALLEY, CA 91977
☎ Phone: (619) 515-2555
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🌐 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361
Provider Gender: Male
License Number: A113001
NPI: 1225231582
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR
Board Certified Specialty: No
📍 8788 JAMACHA RD
SPRING VALLEY, CA 91977
☎ Phone: (619) 515-2555
🕒 After Hours Phone: (619) 515-2555
🌐 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361
Provider Gender: Male
License Number: A113001
NPI: 1225231582
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. 初級保健名錄

MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206361

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

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W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 206361

Provider Gender: Female

License Number: A118095

NPI: 1073701041

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

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515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
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515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
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Phone: (619) 515-2555

After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
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Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR,

D2. 初級保健名錄

BEATRIZ

Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Yue
Chinese


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR,

BEATRIZ

Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Yue
Chinese


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

 8788 JAMACHA RD
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 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

D2. 初級保健名錄

Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

8788 JAMACHA RD
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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. 初級保健名錄

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA


DEL


Provider ID: 206361

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA


DEL

Provider ID: 206361

Provider Gender: Female

License Number: A114181

NPI: 1740514249

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206361

Provider Gender: Male

License Number: A154298

NPI: 1710316450

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO


Provider ID: 206361

Provider Gender: Male

License Number: A154298

NPI: 1710316450

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP


CORONADO HOSP AND


HEALTHCARE CTR,

GROSSMONT HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

D2. 初級保健名錄

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

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 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

 8788 JAMACHA RD
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Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206361

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

D2. 初級保健名錄

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **WINESBURG, JENNIFER**

Provider ID: 206361
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY **ZIEG, ALAN**

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
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515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS **JI, AMANDA**

Provider ID: 206361

D2. 初級保健名錄

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
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Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

Fax: (360) 462-2750


After Hours Phone: (760)
742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D2. 初級保健名錄

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT

NEIGHBORHOOD


HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

 Provider English Spoken: Y
Cultural Competency: N

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


AYON MARTINEZ, CARLOS


Provider ID: 519918

Provider Gender: Male

License Number: A114419


NPI: 1154583128



 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919
 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179


 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female


License Number: A139490


NPI: 1487072179


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. 初級保健名錄

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Greek,
Spanish


Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Greek,

Spanish


Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD


HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD


HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CRAYCHEE, LEO

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

 28714 VALLEY CENTER RD
STE L

VALLEY CENTER, CA 92082

 Phone: (760) 749-7770

D2. 初級保健名錄

Fax: (760) 751-9988

☎ After Hours Phone: (760) 749-7770

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

PHYSICIANS ASSISTANT

AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082

☎ Phone: (760) 742-9919

☎ After Hours Phone: (760) 742-9919

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

AGUEY, OMAR

Provider ID: 519918

Provider Gender: Male

License Number: PA18708

NPI: 1851479372

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082

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☎ After Hours Phone: (760) 742-9919

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

VISTA

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

📍 134 GRAPEVINE RD VISTA, CA 92083

☎ Phone: (760) 631-5000

☎ After Hours Phone: (760) 631-5000

🌐 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

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Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

D2. 初級保健名錄

CERTIFIED NURSE

PRACTITIONER

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: RN410247

NPI: 1700974789


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: NP7791

NPI: 1700974789


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: NP7791

NPI: 1700974789


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

SCHAEPE, RHODORA

Provider ID: 400339

Provider Gender: Female

License Number: RN410247

NPI: 1700974789


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER

WILLIAMS, JINA



Provider ID: 400339

D2. 初級保健名錄

Provider Gender: Female
License Number: NP95020624
NPI: 1225500259

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339



Provider Gender: Female

License Number: NP95020624
NPI: 1225500259

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



CHIROPRACTOR

JU, NATHANIEL

Provider ID: 400339


Provider Gender: Male



License Number: DC32054
NPI: 1972883882

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



CHIROPRACTOR

JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054
NPI: 1972883882



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese


Cultural Competency: N

Board Certified Specialty: No

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 664798


Provider Gender: Female

NPI: 1891069662


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

VCC DURIAN,


Provider ID: 411518


NPI: 1851300123

 Provider English Spoken: Y

D2. 初級保健名錄

Cultural Competency: N

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM


FQHC


VCC DURIAN,

Provider ID: 411518

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM


FQHC


VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC


VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339

NPI: 1851300123

 Provider English Spoken: Y
Cultural Competency: N

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

GENERAL PRACTICE


RONAN, KEVIN


Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

D2. 初級保健名錄

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

AMANI, RAMIN

Provider ID: 79901

Provider Gender: Male

NPI: 1659366292

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Board Certified Specialty: No

950 CIVIC CENTER DR STE

A

VISTA, CA 92083

Phone: (760) 439-4839

Fax: (760) 439-4841

After Hours Phone: (760)
439-4839

Website: N/A

Email:

RAMINAMANIMD@GMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 9:00AM-4:00PM

W 9:00AM-0:00PM

TH-F 9:00AM-4:00PM

PEDIATRICS

AMBO, STANLEY

Provider ID: 52269

Provider Gender: Male

NPI: 1891735676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

2067 W VISTA WAY STE 180

VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)

945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507

Provider Gender: Female

NPI: 1053484568

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

2067 W VISTA WAY STE 280

VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM

SA 9:00AM-1:00PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

D2. 初級保健名錄

Board Certified Specialty: No
2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779

Provider Gender: Male

NPI: 1326082868

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

KARP, MICHAEL

Provider ID: 95672

Provider Gender: Male

NPI: 1295808632

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

KRAK, MICHAEL

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419







Provider English Spoken: Y
Provider Language(s)

D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Board Certified Specialty: Yes
 2067 W VISTA WAY STE 280 VISTA, CA 92083
 *Phone: (760) 941-3630*
Fax: (760) 941-1214
 *After Hours Phone: (760) 941-3630*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-6:00PM SA 9:00AM-1:00PM

PEDIATRICS






LUSCHWITZ, BRIAN


Provider ID: 400339
Provider Gender: Male
License Number: A60517
NPI: 1205868510
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
 134 GRAPEVINE RD VISTA, CA 92083
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*

nityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-5:00PM TU 10:30AM-7:30PM W-F 8:00AM-5:00PM

PEDIATRICS

LUSCHWITZ, BRIAN






Provider ID: 400339
Provider Gender: Male
License Number: A60517
NPI: 1205868510
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
 134 GRAPEVINE RD VISTA, CA 92083
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*

Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M 8:00AM-5:00PM TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM


PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118
Provider Gender: Female
NPI: 1093755878
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
 2067 W VISTA WAY STE 180 VISTA, CA 92083
 *Phone: (760) 945-3434*
Fax: (760) 945-6761
 *After Hours Phone: (760) 945-3434*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894
Provider Gender: Female
NPI: 1609947464
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS

D2. 初級保健名錄

MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
CHILDRENS HOSP OF LOS
ANGELES

Board Certified Specialty: No

📍 2067 W VISTA WAY STE 180
VISTA, CA 92083

☎ Phone: (760) 945-3434

Fax: (760) 945-6761

📞 After Hours Phone: (760)
945-3434

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-2:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

📞 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

📞 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

D3. 專業提供者目錄

ALPINE

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No

6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)
884-5990

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1902470537

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268654

Board Certified Specialty: No

1820 MARRON RD STE 102
CARLSBAD, CA 92008

Phone: (760) 434-0125

Fax: (760) 434-4531

After Hours Phone: (760)
434-0125

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

NEUROLOGY

YOSHII-CONTRERAS, JUNE

Provider ID: 296589

Board Certified Specialty: No

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1437441763

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS


D3. 專業提供者目錄


MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

DONALDSON, CHADWICK

Provider ID: 268146

Board Certified Specialty: No

 2390 FARADAY AVE
CARLSBAD, CA 92008

 Phone: (858) 909-0770


Fax: (858) 909-0880

 After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1891743910

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
TEMECULA VALLEY HOSPITAL
INC, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA
MED CTR, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011


 Phone: (760) 631-3000

Fax: (760) 631-3016

 After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1598160343

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-4:00PM


 Website: N/A


PHYSICIANS ASSISTANT

INOCELDA, ANDREW

Provider ID: 269089

Board Certified Specialty: No

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (760) 631-3000

Fax: (760) 631-3016

 After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1497950208


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

SHIMIZU, KELSIE MIDORI

Provider ID: 296819

Board Certified Specialty: No

 2390 FARADAY AVE
CARLSBAD, CA 92008

 Phone: (858) 909-0770

Fax: (858) 909-0880

 After Hours Phone: (858)
909-0770

Provider Gender: Female

NPI: 1972107811

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KECK

HOSPITAL OF USC, USC
KENNETH NORRIS JR CANCER

HOSPITAL, USC VERDUGO

HILLS HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

WILAND, WINONA

Provider ID: 296809

Board Certified Specialty: No

 2390 FARADAY AVE
CARLSBAD, CA 92008

 Phone: (858) 909-0770

Fax: (858) 909-0880

 After Hours Phone: (858)
909-0770

Provider Gender: Female

NPI: 1043967383


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL


THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248010

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 471-5139

 After Hours Phone: (760)

591-7750

Provider Gender: Male

NPI: 1114977535

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 8\125

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM

 Website: N/A


REGISTERED PHYSICAL


THERAPIST

BOUTELLE, DAVID

Provider ID: 248307

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 471-5139

 After Hours Phone: (760)
434-6100

Provider Gender: Male

NPI: 1063461101

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM


 Website: N/A


REGISTERED PHYSICAL **THERAPIST**

MCGEE, JACQUELINE

Provider ID: 252472

Board Certified Specialty: No

 3070 MADISON ST
CARLSBAD, CA 92008

 Phone: (760) 434-6100

Fax: (760) 434-4583

 After Hours Phone: (760)
434-6100

Provider Gender: Female

NPI: 1194217133


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 8\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-6:00PM

 Website: N/A

SURGERY NEUROLOGICAL


BEN-HAIM, SHARONA


Provider ID: 244069

Board Certified Specialty: No

 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female






NPI: 1942469663



 Provider English Spoken: Y

D3. 專業提供者目錄




 *Provider Language(s)*
Spoken: Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY NEUROLOGICAL **BLASKIEWICZ, DONALD**

Provider ID: 270283
Board Certified Specialty: No
 6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1215176839
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*





PROVIDER
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




SURGERY NEUROLOGICAL **MURTHY, NIKHIL**

Provider ID: 299996
Board Certified Specialty: No
 6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1710371273

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

SURGERY NEUROLOGICAL **PHAM, MARTIN**






Provider ID: 203510
Board Certified Specialty: No
 6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
 *Phone: (619) 543-5540*
 *After Hours Phone: (619) 543-5540*
Provider Gender: Male
NPI: 1609130921
 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CHULA VISTA

ANESTHESIOLOGY PAIN **MANAGEMENT**

DAIRO, BRANDON

Provider ID: 299879
Board Certified Specialty: No
 340 4TH AVE STE 19
CHULA VISTA, CA 91910
 *Phone: (619) 761-5308*
Fax: (619) 591-1910
 *After Hours Phone: (619) 761-5308*
Provider Gender: Male
NPI: 1689092470
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
 *Accessibility: CONTACT*

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300088
Board Certified Specialty: No
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619)
761-5308
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303445
Board Certified Specialty: No
765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619)
616-2100

Provider Gender: Male
NPI: 1962899823

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295381
Board Certified Specialty: No
340 4TH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619)
761-5308

Provider Gender: Male
NPI: 1649594979

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, French,
Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH

Provider ID: 290591
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184

After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1598037178

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 262342
Board Certified Specialty: No
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)

D3. 專業提供者目錄

421-3361
Provider Gender: Female
NPI: 1508370875
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 295830
Board Certified Specialty: No
📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
☎ Phone: (619) 421-3361
Fax: (619) 869-4378
🕒 After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1508370875
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 268746
Board Certified Specialty: No
📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
☎ Phone: (619) 421-3361
Fax: (619) 869-4378
🕒 After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1508370875
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
📍 340 4TH AVE STE 4
CHULA VISTA, CA 91910
☎ Phone: (619) 427-1144
Fax: (619) 427-1185
🕒 After Hours Phone: (619)
427-1144
Provider Gender: Female
NPI: 1184905994
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARAPIA, FABIOLA

Provider ID: 295918
Board Certified Specialty: No
📍 340 4TH AVE STE 4
CHULA VISTA, CA 91910
☎ Phone: (619) 427-1144
Fax: (619) 427-1185
🕒 After Hours Phone: (619)
427-1144
Provider Gender: Female
NPI: 1184905994
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARRION GELABERT, ANA

Provider ID: 302402
Board Certified Specialty: No
📍 450 FOURTH AVE STE 215
CHULA VISTA, CA 91910
☎ Phone: (619) 425-3840
Fax: (619) 425-3842

D3. 專業提供者目錄

☎ After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1023178233

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-6:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH

Provider ID: 302418

Board Certified Specialty: No

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

☎ Phone: (619) 425-3840

Fax: (619) 425-3842

☎ After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1528632742

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 300304

Board Certified Specialty: No

📍 880 THIRD AVESTE A
CHULA VISTA, CA 91911

☎ Phone: (619) 662-4100

Fax: (619) 618-2035

☎ After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1821331174

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-7:30PM

SA 8:00AM-2:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 262418

Board Certified Specialty: No

📍 1323 3RD AVE
CHULA VISTA, CA 91911

☎ Phone: (619) 409-6900

Fax: (619) 409-6901

☎ After Hours Phone: (619)
409-6900

Provider Gender: Male

NPI: 1821331174

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider ID: 293297

Board Certified Specialty: No

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 425-1184

☎ After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1114329612

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM

D3. 專業提供者目錄

SA 8:00AM-2:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301598

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Phone: (619) 397-4500

Fax: (858) 429-7931

After Hours Phone: (619)
397-4500

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

DILLMAN, ARIANA

Provider ID: 290495

Board Certified Specialty: Yes

333 H ST STE 2080
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (661) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497067862

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: BEVERLY
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

EINSTEIN, ERIC

Provider ID: 290482

Board Certified Specialty: No

333 H ST STE 2080
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1154683787

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CORONA
REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

FRENCH, TONIANNE

Provider ID: 290538

Board Certified Specialty: No

333 H ST STE 2080
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1770578411

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477

Board Certified Specialty: No

333 H ST STE 2080
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1053766766

D3. 專業提供者目錄





 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:30AM-5:30PM
SA 8:00AM-2:30PM
 *Website: N/A*

EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537
Board Certified Specialty: No
 333 H ST STE 2080
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100


Provider Gender: Male
NPI: 1336556604

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Adventist
Health Bakersfield
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:30AM-5:30PM
SA 8:00AM-2:30PM
 *Website: N/A*

EMERGENCY MEDICINE

HARRELL-BURDER, BEVERLY




Provider ID: 295890
Board Certified Specialty: No
 333 H ST STE 2080
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
Provider Gender: Female
NPI: 1619907581

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*




EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304935
Board Certified Specialty: No
 386 E H ST STE 202
CHULA VISTA, CA 91910
 *Phone: (858) 966-1720*
Fax: (858) 966-1725
 *After Hours Phone: (858)*
966-1720




Provider Gender: Female
NPI: 1811423072

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 1:00PM-10:00PM*
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 290637
Board Certified Specialty: No
 333 H ST STE 2080
CHULA VISTA, CA 91910
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100

Provider Gender: Female
NPI: 1295112670

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UNIVERSITY
HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:30AM-5:30PM
SA 8:30AM-2:30PM
 *Website: N/A*

EMERGENCY MEDICINE

REARDON, JACQUELINE

D3. 專業提供者目錄

Provider ID: 290673

Board Certified Specialty: No

333 H ST STE 2080

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1417928557

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

EMERGENCY MEDICINE

ROXAS, ROGER

Provider ID: 290600

Board Certified Specialty: No

333 H ST STE 2080

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1578910840

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 290970

Board Certified Specialty: No

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1649628587

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

Website: N/A

FAMILY PRACTICE

DEIS, CRISTINA

Provider ID: 302757

Board Certified Specialty: No

1637 THIRD AVESTE H
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1639478811

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 300230

Board Certified Specialty: No

880 3RD AVE STE A
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 618-2035

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1285782151

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM


 Website: N/A


FAMILY PRACTICE

LOZANO, JUAN

Provider ID: 303517

Board Certified Specialty: No

 1637 THIRD AVESTE B
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

Fax: (619) 205-1376

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1396373619

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

FAMILY PRACTICE


LOZANO, JUAN


Provider ID: 305471

Board Certified Specialty: No

 1637 THIRD AVE STE
B-F-H-I

CHULA VISTA, CA 91911

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1396373619

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

VELASQUEZ, SHARON


Provider ID: 299164

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910



 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1972732584

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296068

Board Certified Specialty: No

 296 H ST STE 301
CHULA VISTA, CA 91910

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1770961971

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, UNIVERSITY OF

CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, UCSD

MEDICAL CTR, SCRIPPS


MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


GASTROENTEROLOGY


SHAFFER, KATHERINE

Provider ID: 305510

Board Certified Specialty: No

 296 H ST STE 301
CHULA VISTA, CA 91910

 Phone: (619) 266-3332

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE
VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 257480

Board Certified Specialty: Yes

 353 CHURCH AVE STE A
CHULA VISTA, CA 91910


 Phone: (619) 585-8883

Fax: (619) 585-8892

 After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY


HOSPITAL, SHARP CHULA
VISTA MED CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-4:30PM
F 8:30AM-3:00PM

 Website: N/A


GENERAL PRACTICE

SAMI, REMAN


Provider ID: 295214

Board Certified Specialty: No

 678 3RD AVE
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268688

Board Certified Specialty: No

 310 3RD AVE STE C11
CHULA VISTA, CA 91910

 Phone: (619) 426-0841

Fax: (619) 426-9197

 After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1063558856


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268651

Board Certified Specialty: No

 310 3RD AVE STE C11
CHULA VISTA, CA 91910

 Phone: (619) 426-0841

Fax: (619) 426-9197

 After Hours Phone: (619)

D3. 專業提供者目錄

426-0841
Provider Gender: Female
NPI: 1902853344
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:00PM
🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

ITURBE-ALESSIO, IGNACIO

Provider ID: 295662
Board Certified Specialty: No
📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
☎ Phone: (619) 745-1031
Fax: (619) 745-1032
🕒 After Hours Phone: (619)
745-1031
Provider Gender: Male
NPI: 1972513695
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

ITURBE-ALESSIO, IGNACIO

Provider ID: 297145
Board Certified Specialty: No
📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
☎ Phone: (619) 745-1031
Fax: (619) 745-1032
🕒 After Hours Phone: (619)
745-1031
Provider Gender: Male
NPI: 1972513695
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

JOHNSON, KENNETH

Provider ID: 262288
Board Certified Specialty: No
📍 769 MEDICAL CENTER CT
STE 202

CHULA VISTA, CA 91911
☎ Phone: (619) 482-8430
Fax: (619) 482-8005
🕒 After Hours Phone: (619)
482-8430
Provider Gender: Male
NPI: 1063527711
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

MOOLANI, RAMESH

Provider ID: 297928
Board Certified Specialty: No
📍 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
☎ Phone: (619) 745-1031
Fax: (619) 745-1032
🕒 After Hours Phone: (619)
745-1031
Provider Gender: Male
NPI: 1437272010
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA


D3. 專業提供者目錄

VISTA, LOMA LINDA
UNIVERSITY MED CTR
MURRIETA, SHARP CHULA
VISTA MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

MOOLANI, RAMESH


Provider ID: 295976

Board Certified Specialty: No

 855 3RD AVE STE 3330
CHULA VISTA, CA 91911

 Phone: (619) 745-1031

Fax: (619) 745-1032

 After Hours Phone: (619)
745-1031

Provider Gender: Male

NPI: 1437272010

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, LOMA LINDA


UNIVERSITY MED CTR



MURRIETA, SHARP CHULA
VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE


NAIDZIONAK, ULADZISLAU

Provider ID: 290568

Board Certified Specialty: No

 750 MEDICAL CENTER CT
STE 9

CHULA VISTA, CA 91911


 Phone: (619) 421-6922


Fax: (619) 421-5569

 After Hours Phone: (619)
421-6922

Provider Gender: Male

NPI: 1023246212

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-4:00PM
TU 9:00AM-5:00PM

W 9:00AM-4:00PM

TH-F 9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: No

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


NAGHI, JESSE

Provider ID: 247625

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911

 Phone: (619) 867-0557



Fax: (619) 867-0558

 After Hours Phone: (619)
867-0557




Provider Gender: Male

NPI: 1386896736

D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Bulgarian,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY


ROUGH, STEVEN

Provider ID: 302985

Board Certified Specialty: No

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911



 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288




Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY


ROUGH, STEVEN

Provider ID: 298442

Board Certified Specialty: No

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911



 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288




Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY


SHEREV, DIMITRI

Provider ID: 268950

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911



 Phone: (619) 867-0557

Fax: (619) 867-0558

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL):  765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
 Phone: (619) 616-2100
 Fax: (619) 616-2104
 After Hours Phone: (619)
616-2100

 Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296051

Board Certified Specialty: No

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295846

Board Certified Specialty: No


Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296993

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

MATERNAL AND FETAL

MEDICINE


MCCULLOUGH, DEIRDRE

Provider ID: 277263

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female




NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP








MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

D3. 專業提供者目錄

 *PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



MATERNAL AND FETAL MEDICINE




REIMERS, REBECCA

Provider ID: 294653
Board Certified Specialty: No
 *386 E H ST STE 202*
CHULA VISTA, CA 91910
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858)*
966-6710
Provider Gender: Female
NPI: 1801207634
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE




Provider ID: 264687
Board Certified Specialty: No
 *386 E H ST STE 202*
CHULA VISTA, CA 91910
 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858)*
966-6710
Provider Gender: Male
NPI: 1154305977
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

MATERNAL AND FETAL MEDICINE






WESTERMANN, MELISSA

Provider ID: 242523
Board Certified Specialty: No
 *386 E H ST STE 202*
CHULA VISTA, CA 91910
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858)*
966-6710
Provider Gender: Female
NPI: 1760730758
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG



BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646
Board Certified Specialty: No
 *435 H ST*
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
 *After Hours Phone: (619)*
691-7000
Provider Gender: Female
NPI: 1679809826
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297976
Board Certified Specialty: No


 435 H ST
CHULA VISTA, CA 91910

 Phone: (619) 691-7000
Fax: (619) 260-7055

 After Hours Phone: (619)
691-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262159

Board Certified Specialty: No

 435 H ST
CHULA VISTA, CA 91910


 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301823

Board Certified Specialty: No


 435 H ST
CHULA VISTA, CA 91910

 Phone: (619) 691-7000
Fax: (619) 260-7055

 After Hours Phone: (619)
691-7000

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 304829

Board Certified Specialty: No

 435 H ST
CHULA VISTA, CA 91910

 Phone: (619) 691-7000
Fax: (619) 260-7055

 After Hours Phone: (619)
691-7000

Provider Gender: Male

NPI: 1801978143

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144

Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,

PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

MOOLANI, UJJALA

Provider ID: 296069
Board Certified Specialty: No
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361
Provider Gender: Female
NPI: 1528221421

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Sindhi,
Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

D3. 專業提供者目錄

NEPHROLOGY

MOOLANI, UJJALA

Provider ID: 295915

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Female

NPI: 1528221421

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Sindhi,
Spanish, Urdu

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639

Board Certified Specialty: No

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

NPI: 1821359605

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863

Board Certified Specialty: No

340 FOURTH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1235629932

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 290110

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP

AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

D3. 專業提供者目錄

Provider ID: 65646

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 262286

Board Certified Specialty: No

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551

Board Certified Specialty: No

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1043442379

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, PARADISE

VALLEY HOSPITAL, Providence

St Joseph Hospital, Providence

St Jude Medical Center, SOUTH

COAST GLOBAL MEDICAL
CENTER INC, ENCOMPASS

HEALTH REHABILITATION

HOSPITAL OF TUSTIN, Foothill

Regional Medical Center,

Foothill Regional Medical

Center, KINDRED HOSPITAL

BREA, KINDRED HOSPITAL LA

MIRADA, KINDRED HOSPITAL

SANTA ANA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA

Provider ID: 304999

Board Certified Specialty: No

450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840

Fax: (619) 485-5440

After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1316471485

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC




Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY

MOHAMMAD, AHMAD SHAH

Provider ID: 127244

Board Certified Specialty: No

 750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911



 *Phone: (619) 337-7900*

Fax: (619) 337-7902

 *After Hours Phone: (619)
337-7900*

Provider Gender: Male

NPI: 1902973472

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Arabic, Farsi,
French, German, Pushto,
Spanish*

Cultural Competency: N

Hospital Affiliation:




*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295744

Board Certified Specialty: No

 450 4TH AVE STE 215
CHULA VISTA, CA 91910



 *Phone: (619) 425-3840*

Fax: (619) 485-5440

 *After Hours Phone: (619)
425-3840*

Provider Gender: Male

NPI: 1225474034

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: UCSD

*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, TEMECULA
VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-6:00PM*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT


Provider ID: 268953

Board Certified Specialty: Yes

 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911

 *Phone: (619) 482-8406*

Fax: (619) 482-6656


 *After Hours Phone: (619)*

482-8406

Provider Gender: Male

NPI: 1033138714

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: SHARP

*CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH
8:00AM-5:00PM*

F 8:00AM-0:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT


Provider ID: 290331

Board Certified Specialty: Yes

 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911


 *Phone: (619) 482-8406*


Fax: (619) 482-6656

 *After Hours Phone: (619)
482-8406*

Provider Gender: Male

NPI: 1033138714

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: SHARP

*CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL*


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 13\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM


 Website: N/A


OCCUPATIONAL THERAPIST

MORRIS, SHEILA

Provider ID: 268926

Board Certified Specialty: No

 1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910


 Phone: (619) 585-7104

Fax: (619) 585-7106

 After Hours Phone: (619)
585-7104

Provider Gender: Female

NPI: 1689039877

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-6:00PM
SA 7:00AM-2:00PM

 Website: N/A


OPHTHALMOLOGY

BRYANT, DUANE

Provider ID: 297630

Board Certified Specialty: No

 342 F ST
CHULA VISTA, CA 91910


 Phone: (619) 422-1471

Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471

Provider Gender: Male

NPI: 1023117124

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W 8:00AM-5:00PM
TH-F 7:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BRYANT, DUANE

Provider ID: 244753

Board Certified Specialty: No

 342 F ST
CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471

Provider Gender: Male

NPI: 1023117124

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 13\130

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W 8:00AM-5:00PM
TH-F 7:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

HO, AMIEE

Provider ID: 297633

Board Certified Specialty: No

 342 F ST
CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1396009478

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄


 Website: N/A

OPTOMETRIST


CHAIN, PEI CHI

Provider ID: 297621

Board Certified Specialty: No

 342 F ST

CHULA VISTA, CA 91910


 Phone: (619) 422-1471

Fax: (619) 422-2025

 After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1730676727

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A

OPTOMETRIST


KOO, ANITA


Provider ID: 304830

Board Certified Specialty: No

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1669825667

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST


KOO, ANITA

Provider ID: 304537

Board Certified Specialty: No

 835 THIRD AVE STE A

CHULA VISTA, CA 91911

 Phone: (619) 425-7755

Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667


 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN


Provider ID: 268679

Board Certified Specialty: No

 2260 OTAY LAKES RD STE

111

CHULA VISTA, CA 91915

 Phone: (619) 421-5550

Fax: (866) 254-5707

 After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST


MASCARENO, EFRAIN

Provider ID: 262228

Board Certified Specialty: No

 2260 OTAY LAKES RD STE
111

CHULA VISTA, CA 91915


 Phone: (619) 421-5550

Fax: (866) 254-5707

 After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279


 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262229

D3. 專業提供者目錄

Board Certified Specialty: No

440 4TH AVE STE 9
CHULA VISTA, CA 91910

Phone: (619) 427-2020

Fax: (866) 254-5707

After Hours Phone: (619)
427-2020

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268680

Board Certified Specialty: No

440 4TH AVE STE 9
CHULA VISTA, CA 91910

Phone: (619) 427-2020

Fax: (866) 254-5707

After Hours Phone: (619)
427-2020

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-6:00PM

Website: N/A

OPTOMETRIST

NGUYEN, THU

Provider ID: 298022

Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

NGUYEN, THU

Provider ID: 265518

Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

NGUYEN, THU

Provider ID: 125032

Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1326323627

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. 專業提供者目錄

OPTOMETRIST

RICHARDSON, JULIA

Provider ID: 297645

Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1770154528

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

SCOVILL, ALEXANDRA

Provider ID: 297625

Board Certified Specialty: No

342 F ST
CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0114

After Hours Phone: (619)
422-1471

Provider Gender: Female

NPI: 1184146094

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304888

Board Certified Specialty: No

340 FOURTH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MCCALLION, PATRICK

Provider ID: 290541

Board Certified Specialty: No

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1134144454

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1518456508

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D3. 專業提供者目錄

9:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303782

Board Certified Specialty: No

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-1720

Fax: (858) 966-1725

After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1851927883

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 245751

Board Certified Specialty: No

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-1720

Fax: (858) 966-1725

After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE

Provider ID: N/A

Board Certified Specialty: No

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-1720

After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1366622078

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275787

Board Certified Specialty: No

386 E H ST STE 202
CHULA VISTA, CA 91910

Phone: (858) 966-1720

Fax: (858) 966-1725

After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297176

Board Certified Specialty: No

D3. 專業提供者目錄

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


MENDES, CHANTAL

Provider ID: 295669

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE


MINKA, GENEVIEVE

Provider ID: 289468

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910


 Phone: (858) 966-1720


Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1689646689

 Provider English Spoken: Y

 Provider Language(s)

Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


OZAKI, YOSHIHIRO

Provider ID: 241923

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Male

NPI: 1467898239

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: VALLEY

CHILDRENS HOSPITAL, RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE


VAIDYA, KAMALA

Provider ID: 289411

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

 Phone: (858) 966-1720

Fax: (858) 966-1725

D3. 專業提供者目錄

☎ After Hours Phone: (858) 966-1720

Provider Gender: Female

NPI: 1083840920

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 306065

Board Certified Specialty: No

📍 280 E ST
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 426-2170

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1992876759

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295275

Board Certified Specialty: No

📍 340 4TH AVE STE 19
CHULA VISTA, CA 91910

☎ Phone: (760) 607-5350

Fax: (760) 607-5365

☎ After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1407052459

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300093

Board Certified Specialty: No

📍 340 4TH AVE STE 19
CHULA VISTA, CA 91910

☎ Phone: (619) 761-5308

Fax: (619) 591-1910

☎ After Hours Phone: (619)

761-5308

Provider Gender: Female

NPI: 1477129302

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301592

Board Certified Specialty: No

📍 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 397-4500

Fax: (858) 429-7931

☎ After Hours Phone: (619)
397-4500

Provider Gender: Female

NPI: 1609987619

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


GI, HUNG

Provider ID: 302126

Board Certified Specialty: No

 280 E ST

CHULA VISTA, CA 91910


 Phone: (619) 662-4100


Fax: (619) 662-4196

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1023207404

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese, French, Spanish

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


GUTH, CARA

Provider ID: 299110


Board Certified Specialty: No

 480 4TH AVE STE 501

CHULA VISTA, CA 91910

 Phone: (619) 425-9510

Fax: (619) 425-0539

 After Hours Phone: (619) 425-9510

Provider Gender: Female

NPI: 1992177182

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


INDA, PRISCILLA

Provider ID: 265072

Board Certified Specialty: No

 450 4TH AVE STE 215

CHULA VISTA, CA 91910


 Phone: (619) 434-0204


Fax: (619) 337-0191

 After Hours Phone: (619) 434-0204

Provider Gender: Female

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic, Russian, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\110

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 268744

Board Certified Specialty: No

 2452 FENTON ST STE C203
CHULA VISTA, CA 91914

 Phone: (619) 600-5309

Fax: (619) 655-4700

 After Hours Phone: (619) 600-5309

Provider Gender: Male

NPI: 1922505775

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No

 2452 FENTON ST STE C101
CHULA VISTA, CA 91914

 Phone: (619) 600-5309

D3. 專業提供者目錄

Fax: (619) 655-4700

☎ After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295828

Board Certified Specialty: No

📍 2452 FENTON ST STE C203
CHULA VISTA, CA 91914

☎ Phone: (619) 600-5309

Fax: (619) 655-4700

☎ After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302389

Board Certified Specialty: No

📍 340 FOURTH AVE STE 19
CHULA VISTA, CA 91910

☎ Phone: (619) 761-5308

Fax: (619) 591-1910

☎ After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1629674858

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

DAVIDSON, JOHN

Provider ID: 129545

Board Certified Specialty: No

📍 345 F ST STE 100
CHULA VISTA, CA 91910

☎ Phone: (619) 427-3481

Fax: (619) 420-7807

☎ After Hours Phone: (619)

427-3481

Provider Gender: Male

NPI: 1689069874

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-4:30PM

🌐 Website: N/A

PODIATRIST

READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No

📍 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

☎ Phone: (619) 631-4033

Fax: (619) 880-5057

☎ After Hours Phone: (619)
631-4033

Provider Gender: Male

NPI: 1952963431

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

BAYLON, ALDO

Provider ID: 290243
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619)
662-4100

Provider Gender: Male
NPI: 1649429150

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM
Website: N/A

PSYCHOLOGIST

CELAYA, PATRICIA

Provider ID: 294875
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1952656902

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM
Website: N/A

PSYCHOLOGIST

GALLO, LINDA

Provider ID: 296782
Board Certified Specialty: No
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 240-7852

After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1427773621

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

GOULD, HILARY

Provider ID: 290467

Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260

After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1104297696

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

PSYCHOLOGIST

WIJAYARATNE, IMANIE



Provider ID: 290092
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260

After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1932358355

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303101

Board Certified Specialty: No

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (858) 939-5010

Fax: (619) 740-8499

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 206393

Board Certified Specialty: No

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-5851

Fax: (619) 502-5865

 After Hours Phone: (619)
502-5851

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

VOLPP, PAUL


Provider ID: 221102

Board Certified Specialty: No

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-5851

Fax: (619) 502-5865

 After Hours Phone: (619)
502-5851

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 200538

Board Certified Specialty: No

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (619) 502-5851


Fax: (619) 502-5865

 After Hours Phone: (619)
502-5851

Provider Gender: Male

NPI: 1841233947

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304529

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
7:00AM-7:00PM

F 7:00AM-5:00PM

SA 8:00AM-1:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DAGOSTINO, JACQUELINE

Provider ID: 243632

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1710457379

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DAGOSTINO, JACQUELINE

Provider ID: 301377

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1710457379

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DORSEY, KYLE

Provider ID: 301422

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1790334316

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

DORSEY, KYLE

Provider ID: 286987

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1790334316

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER

 Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL

THERAPIST


HERMAN, RACHEL

Provider ID: 301376

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1477121762

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


HERMAN, RACHEL

Provider ID: 286656

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1477121762

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No

 880 THIRD AVE STE A CHULA VISTA, CA 91911


 Phone: (619) 205-4585


Fax: (619) 271-3183

 After Hours Phone: (619) 205-4585

Provider Gender: Female

NPI: 1063170603

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 55\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


JIMENEZ, ANDREA

Provider ID: 299889

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1407440670

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


KARANDE, PRACHI

Provider ID: 301380

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1699357525

 Provider English Spoken: Y

Cultural Competency: N

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


KARANDE, PRACHI

Provider ID: 287100

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1699357525

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA


Provider ID: 305013

Board Certified Specialty: No

 1392 E PALOMAR ST STE

503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NGUYEN, TIA

Provider ID: 305014

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TH

7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NOVENCIDO, ANDREW

Provider ID: 301994

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST


NOVENCIDO, ANDREW

Provider ID: 286782

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

D3. 專業提供者目錄

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1447723937

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

SPARKS, TODD

Provider ID: 301108

Board Certified Specialty: No

📍 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1265481139

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

SPARKS, TODD

Provider ID: 129142

Board Certified Specialty: No

📍 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1265481139

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

STAHL, KEVIN

Provider ID: 305424

Board Certified Specialty: No

📍 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1760194302

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

STAHL, KEVIN

Provider ID: 301418

Board Certified Specialty: No

📍 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1760194302

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A

REGISTERED PHYSICAL THERAPIST


VILLANUEVA, GIOVANNI

Provider ID: 301532

Board Certified Specialty: No

 1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1063046878

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

RHEUMATOLOGY


CHITKARA, PUJA

Provider ID: 262358

Board Certified Specialty: No

 765 MEDICAL CENTER CT STE 216

CHULA VISTA, CA 91911

 Phone: (619) 623-3000


Fax: (619) 623-3001

 After Hours Phone: (619) 623-3000

Provider Gender: Female

NPI: 1871718189

 Provider English Spoken: Y N

 Provider Language(s) Spoken: Hindi, Russian, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-4:30PM

 Website: N/A

RHEUMATOLOGY


CHWA, JEFFREY

Provider ID: 268780

Board Certified Specialty: No

 765 MEDICAL CENTER CT STE 216

CHULA VISTA, CA 91911

 Phone: (619) 623-3000

Fax: (619) 623-3001

 After Hours Phone: (619) 623-3000

Provider Gender: Male

NPI: 1285989236

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296928

Board Certified Specialty: No

 333 H ST STE 5000

CHULA VISTA, CA 91910


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1063660165


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SPEECH PATHOLOGIST


CALDERON MORALES, ASTRID

Provider ID: 305582


Board Certified Specialty: No

 333 H ST STE 5000

CHULA VISTA, CA 91910


 Phone: (877) 757-8353

Fax: (818) 357-2505




 After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1619501186

 Provider English Spoken: Y

D3. 專業提供者目錄






 *Provider Language(s)*
Spoken: Armenian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F 7:00AM-7:00PM*
 *Website: N/A*

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296923
Board Certified Specialty: No
 333 H ST STE 5000
CHULA VISTA, CA 91910
 *Phone: (877) 757-8353*
Fax: (818) 357-2505
 *After Hours Phone: (877)*
757-8353

Provider Gender: Female
NPI: 1760546428

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 7:00AM-7:00PM*
M-F 7:00AM-7:00PM
 *Website: N/A*






SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296579

Board Certified Specialty: No
 333 H ST STE 5000
CHULA VISTA, CA 91910
 *Phone: (877) 757-8353*
Fax: (818) 357-2505
 *After Hours Phone: (877)*
757-8353

Provider Gender: Female
NPI: 1205443769



 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F 7:00AM-7:00PM*
 *Website: N/A*

SPEECH PATHOLOGIST




O'DORAN, KAYLA

Provider ID: 296587
Board Certified Specialty: No
 333 H ST STE 5000
CHULA VISTA, CA 91910
 *Phone: (877) 757-8353*
Fax: (818) 357-2505
 *After Hours Phone: (877)*
757-8353

Provider Gender: Female
NPI: 1275021438


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999



American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F 7:00AM-7:00PM*
 *Website: N/A*

SURGERY GENERAL




CASILLAS BERUMEN, SERGIO

Provider ID: 304607
Board Certified Specialty: No
 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
 *Phone: (619) 576-7007*
Fax: (619) 567-7775
 *After Hours Phone: (619)*
576-7007

Provider Gender: Male
NPI: 1437470762

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY GENERAL

MORAL, JOHN

Provider ID: 297841

D3. 專業提供者目錄

Board Certified Specialty: No

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Phone: (619) 425-7470

Fax: (619) 425-7472

After Hours Phone: (619)
425-7470

Provider Gender: Male

NPI: 1720426190

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

Website: N/A

SURGERY GENERAL

MORAL, JOHN

Provider ID: 299238

Board Certified Specialty: No

480 4TH AVE STE 404
CHULA VISTA, CA 91910

Phone: (619) 425-7470

Fax: (619) 425-7472

After Hours Phone: (619)
425-7470

Provider Gender: Male

NPI: 1720426190

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302084

Board Certified Specialty: No

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303195

Board Certified Specialty: No

750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY


SALMASI, AMIRALI


Provider ID: 302913

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 101


CHULA VISTA, CA 91911

 Phone: (619) 397-4500

 After Hours Phone: (619)
397-4500

Provider Gender: Male

NPI: 1609187962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CMP PENDLETON

CERTIFIED NURSE


PRACTITIONER


FREEMAN, WANDA

Provider ID: 298117

Board Certified Specialty: No

 619 CROUCH ST
CMP PENDLETON, CA
92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

HARRIS, PAMELA

Provider ID: 302288

Board Certified Specialty: No

 818 PIER VIEW WAY
CMP PENDLETON, CA
92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CORONADO

CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No

 230 PROSPECT PL STE 210
CORONADO, CA 92118

 Phone: (619) 299-0670

Fax: (858) 429-7929

 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER /


SUPPLIER

DAVIS, KELLE

Provider ID: 268655

Board Certified Specialty: No

 801 ORANGE AVE
CORONADO, CA 92118

 Phone: (619) 437-8154

Fax: (310) 989-3092

 After Hours Phone: (619)
437-8154

D3. 專業提供者目錄

Provider Gender: Female

NPI: 1902853344

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301587

Board Certified Specialty: No

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118

☎ Phone: (619) 299-0670

Fax: (858) 429-7929

🕒 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1609987619

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118

☎ Phone: (619) 435-7282

Fax: (619) 435-3723

🕒 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1679726103

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302102

Board Certified Specialty: No

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118

☎ Phone: (619) 435-7282

Fax: (619) 435-3723

🕒 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1497751457

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

Email: INFO@PALLIAMD.COM

UROLOGY

SALMASI, AMIRALI

Provider ID: 302911

Board Certified Specialty: No

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118





☎ Phone: (619) 299-0670

🕒 After Hours Phone: (619)
299-0670

Provider Gender: Male

NPI: 1609187962







D3. 專業提供者目錄



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

EL CAJON

CARDIOVASCULAR DISEASE

LERNER, JONATHAN






Provider ID: 303446
Board Certified Specialty: No
 1625 E MAIN ST STE 201
EL CAJON, CA 92021
 Phone: (619) 486-6512
Fax: (619) 616-2104
 After Hours Phone: (619)
486-6512
Provider Gender: Male
NPI: 1962899823
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290945
Board Certified Specialty: No
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
Provider Gender: Male
NPI: 1659745610

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: TU-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

SLOAN, ERICA

Provider ID: 303149
Board Certified Specialty: No
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
Provider Gender: Female
NPI: 1740962752





 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BRANNEN, MANDY

Provider ID: 241600
Board Certified Specialty: No
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
Provider Gender: Female
NPI: 1891205159

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 4:00PM-7:00PM
W 4:00PM-7:00PM
F 4:00PM-7:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHUDACEK, JANET

Provider ID: 241626

D3. 專業提供者目錄

Board Certified Specialty: No

215 W MADISON AVE
EL CAJON, CA 92020

Phone: (760) 737-6960

Fax: (760) 741-2782

After Hours Phone: (760)
737-6960

Provider Gender: Female

NPI: 1932606118

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 4:00PM-7:00PM

W 4:00PM-7:00PM

F 4:00PM-7:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA

Provider ID: 302295

Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1164812293

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No

5442 SYCUAN RD
EL CAJON, CA 92019

Phone: (619) 445-0707

Fax: (619) 445-9764

After Hours Phone: (619)
445-0707

Provider Gender: Male

NPI: 1417567827

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)

440-2751

Provider Gender: Female

NPI: 1578865549

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-2:00PM
TU-F 8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

FULKS, ZACKARY

Provider ID: 303814

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 270-3600

Fax: (360) 462-2746

After Hours Phone: (619)
270-3600

Provider Gender: Male

NPI: 1407562531

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

D3. 專業提供者目錄

FULKS, ZACKARY

Provider ID: 301146

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 270-3600

Fax: (360) 462-2746

After Hours Phone: (619)
270-3600

Provider Gender: Male

NPI: 1407562531

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303815

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 301343

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

Fax: (360) 462-2746

After Hours Phone: (619)
440-2751

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303849

Board Certified Specialty: No

470 N MOLLISON AVE
EL CAJON, CA 92021

Phone: (833) 867-4642

Fax: (360) 462-5840

After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1487781035

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 300231

Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

FAMILY PRACTICE

RONQUILLO, KAREN AN

Provider ID: 304781

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020




D3. 專業提供者目錄

 Phone: (619) 440-2751
Fax: (858) 633-4692
 After Hours Phone: (619) 440-2751
Provider Gender: Female
NPI: 1275160012
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067
Board Certified Specialty: No
 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
 Phone: (619) 266-3332
Fax: (619) 266-6000
 After Hours Phone: (619) 266-3332
Provider Gender: Female
NPI: 1770961971
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268692
Board Certified Specialty: No
 1767 E MAIN ST
EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619) 440-6516
Provider Gender: Female
NPI: 1063558856
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





HEARING AID DEALER / SUPPLIER

DAVIS, KELLE




Provider ID: 268650
Board Certified Specialty: No
 1767 E MAIN ST
EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619) 440-6516
Provider Gender: Female
NPI: 1902853344
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

AWDISHO, ALAN


Provider ID: 291282
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1164795498
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N


D3. 專業提供者目錄




 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

MANSOUR, DAVID

Provider ID: 291543
Board Certified Specialty: No
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
Provider Gender: Male
NPI: 1689164949



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 294916
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100


Provider Gender: Male
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE



MICHAEL, RAMI

Provider ID: 294908
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1467871673

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



 Hours: M-F
8:30AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY


SHEREV, DIMITRI

Provider ID: 302988
Board Certified Specialty: No
 1380 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 867-0557
 After Hours Phone: (619)
867-0557

Provider Gender: Male
NPI: 1154323996

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄

 Website: N/A


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295843

Board Certified Specialty: No

 1625 E MAIN ST STE 201
EL CAJON, CA 92021


 Phone: (619) 486-6512

Fax: (619) 616-2104

 After Hours Phone: (619)
486-6512

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP
CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

SEAVEY, MICHELLE

Provider ID: 302873

Board Certified Specialty: No

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1114081833

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital


Medi-Cal Open Panel: Yes


Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 268721

Board Certified Specialty: No

 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020


 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


INDA, PRISCILLA

Provider ID: 265073

Board Certified Specialty: No

 328 HIGHLAND AVE STE
200

EL CAJON, CA 92020

 Phone: (619) 930-9404


Fax: (619) 930-9426

 After Hours Phone: (619)
930-9404

Provider Gender: Female

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\110

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574

Board Certified Specialty: No

 855 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1396478400

D3. 專業提供者目錄

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

RAMOS, JACQUELYN

Provider ID: 301106
Board Certified Specialty: No
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 270-3600
Fax: (360) 462-2746
 After Hours Phone: (619)
270-3600

Provider Gender: Female
NPI: 1003515131

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

ROSENBLATT, SHERI

Provider ID: 305449
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1114041621

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 290286
Board Certified Specialty: No
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1568608636

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309
Board Certified Specialty: No

215 W MADISON AVE
EL CAJON, CA 92020

Phone: (619) 667-6125
Fax: (619) 590-9036

After Hours Phone: (619)
667-6125

Provider Gender: Female
NPI: 1548873755

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PSYCHOLOGIST

GUARDADO-SOTO, RAQUEL

Provider ID: 290342
Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751
Fax: (858) 633-4692

After Hours Phone: (619)
440-2751

Provider Gender: Female
NPI: 1194999276

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL): NPI: 1528079357

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

WHEELER, KIM

Provider ID: 302144

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1700577434


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 11\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

CAMPA, PATRICIA

Provider ID: 302398

Board Certified Specialty: No


 860 JAMACHA RD STE 203
EL CAJON, CA 92019

 Phone: (619) 573-6373

Fax: (619) 378-6578

 After Hours Phone: (619)
573-6373

Provider Gender: Female

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

MORRIS, CHAD

Provider ID: 302403

Board Certified Specialty: No

 860 JAMACHA RD STE 203
EL CAJON, CA 92019

 Phone: (619) 573-6373

Fax: (619) 378-6578

 After Hours Phone: (619)
573-6373

Provider Gender: Male

NPI: 1841307063

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298659

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 18\999

American Sign Language (ASL):

N








ENCINITAS

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES





Provider ID: 304133
Board Certified Specialty: No
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1407401128
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CARDINELL, ANNA








Provider ID: 291412
Board Certified Specialty: No
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1306978614
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER








CHAMBERS, KATRINA

Provider ID: 303521
Board Certified Specialty: No
 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
 Phone: (760) 183-0441
Fax: (760) 635-5972
 After Hours Phone: (760)
183-0441
Provider Gender: Female
NPI: 1710695143
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER




DWYER, ERIN

Provider ID: 301447
Board Certified Specialty: No
 320 SANTA FE DR STE 108
ENCINITAS, CA 92024
 Phone: (760) 436-4558
Fax: (858) 429-7926
 After Hours Phone: (760)
436-4558
Provider Gender: Female
NPI: 1003260894
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268657
Board Certified Specialty: No
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 Phone: (760) 944-5545
Fax: (760) 944-3927
 After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1699078923
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

 Phone: (760) 436-2300

Fax: (760) 436-5482

 After Hours Phone: (760)
436-2300

Provider Gender: Female

NPI: 1821062878

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No

 1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No

 320 SANTA FE DR STE 108
ENCINITAS, CA 92024

 Phone: (760) 436-4558

Fax: (858) 429-7926

 After Hours Phone: (760)
436-4558

Provider Gender: Female


NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268

Board Certified Specialty: No

 1130 2ND ST
ENCINITAS, CA 92024

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578299343

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE



Provider ID: 281856

Board Certified Specialty: No

 1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

D3. 專業提供者目錄

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265487326

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE PRACTITIONER


YEO, ALEXANDRIA

Provider ID: 299940

Board Certified Specialty: No

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1902368319

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Website: N/A

GASTROENTEROLOGY


PATEL, JANKI


Provider ID: 305301

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024


 Phone: (760) 354-9697

 Fax: (760) 635-5972

 After Hours Phone: (760) 354-9697

Provider Gender: Female

NPI: 1548606668

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE


RUBENZIK, TAMARA


Provider ID: 282127

Board Certified Specialty: No

 1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA


Provider ID: 245575

Board Certified Specialty: No

 1200 GARDEN VIEW RD
STE 100

ENCINITAS, CA 92024

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  781 GARDEN VIEW CT STE 200

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


BALLAS, JERASIMOS


Provider ID: 209562

Board Certified Specialty: No

 781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


HULL, ANDREW


Provider ID: 209483

Board Certified Specialty: No

 781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1902862121

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,


UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


LAURENT, LOUISE


Provider ID: 208641

Board Certified Specialty: No

 781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MOORE, THOMAS


Provider ID: 208645

Board Certified Specialty: No

 781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

D3. 專業提供者目錄


MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277315

Board Certified Specialty: No

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209384

Board Certified Specialty: No


 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024


 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL


MEDICINE


WOLF, RICHARD

Provider ID: 209254

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

 Website: N/A

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU


Provider ID: 283286

Board Certified Specialty: No

D3. 專業提供者目錄


 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
 After Hours Phone: (760)
633-6120


Provider Gender: Female
NPI: 1528454188

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301821
Board Certified Specialty: No

 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
Fax: (760) 633-7385
 After Hours Phone: (760)
633-6120


Provider Gender: Female
NPI: 1003260951

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303905
Board Certified Specialty: No

 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 633-6120
Fax: (760) 633-7385


 After Hours Phone: (760)
633-6120


Provider Gender: Male
NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BUI, JONATHAN

Provider ID: 269966
Board Certified Specialty: No

 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
 Phone: (760) 944-6377
Fax: (760) 944-3927


 After Hours Phone: (760)
944-6377

Provider Gender: Male
NPI: 1730247974

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A







NEUROLOGY

JINDAL, ANUJA

Provider ID: 206264
Board Certified Specialty: No





 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024

D3. 專業提供者目錄

 Phone: (760) 944-5545
Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1194046581
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A








NEUROLOGY

SCHORR, EMILY

Provider ID: 305022
Board Certified Specialty: No
 1200 GARDEN VIEW RD ENCINITAS, CA 92024
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255862041
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

NEUROLOGY CHILD





KIM MCMANUS, OLIVIA

Provider ID: 206258
Board Certified Specialty: No
 477 N EL CAMINO REAL BLDG D STE 302 ENCINITAS, CA 92024
 Phone: (760) 944-5545
Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1174870067
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD






SAHAGIAN, MICHELLE

Provider ID: 206073
Board Certified Specialty: No
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 Phone: (760) 944-5545
Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545



Provider Gender: Female
NPI: 1275604035
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 282167
Board Certified Specialty: No
 1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174758031
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291325
Board Certified Specialty: No

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY


DRIEBE, AMY

Provider ID: 293447

Board Certified Specialty: No


 781 GARDEN VIEW CT STE
200

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY


DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No


 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 208682

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
200

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

D3. 專業提供者目錄

American Sign Language (ASL): Fax: (888) 539-8781

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

SHAH, NEMI

Provider ID: 272578

Board Certified Specialty: No

 1200 GARDEN VIEW RD
STE 100


ENCINITAS, CA 92024


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1558715268

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

TEMECULA VALLEY HOSPITAL

INC, LOMA LINDA UNIVERSITY

MED CTR MURRIETA


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 205617


Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (760) 944-3927

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BHATIA, SHAGUN

Provider ID: 267315

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

D3. 專業提供者目錄


HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297012

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1699216010


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 205507

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY


HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR


Provider ID: 216413

Board Certified Specialty: No

 477 N EL CAMINO REAL
BLD D STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 205886

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296797
Board Certified Specialty: No
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
943-7141
Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM
Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206085
Board Certified Specialty: No
477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927

After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244900
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206112
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1124230909
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY


PATEL, VIJAY

Provider ID: 297035
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545

D3. 專業提供者目錄

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY


GREINER, ALEXANDER

Provider ID: 205696

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024


 Phone: (858) 966-4900


Fax: (760) 944-3927

 After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

 Provider English Spoken: Y

 Provider Language(s)

Spoken: French, German,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY


HALEY, JESSICA

Provider ID: 205688

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024


 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI


Provider ID: 239115

Board Certified Specialty: No

 477 N EL CAMINO REAL

BLDG D STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


SILVA SEPULVEDA, JOSE

Provider ID: 206299

Board Certified Specialty: No

 477 N EL CAMINO REAL
BLDG D STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301641

Board Certified Specialty: No



 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294676

Board Certified Specialty: No


 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC PULMONOLOGY


CERNELC KOHAN, MATEJKA

Provider ID: 243043

Board Certified Specialty: No

 477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1871752451

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY


LENHART-PENDERGRASS, PATRICIA

Provider ID: 294642

Board Certified Specialty: No


 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246395
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
After Hours Phone: (760)
944-5545

Provider Gender: Female
NPI: 1821242199

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON

Provider ID: 256227
Board Certified Specialty: No
477 N EL CAMINO REAL
STE C100
ENCINITAS, CA 92024
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1447661657
Provider English Spoken: Y
Provider Language(s)
Spoken: Korean
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 269171
Board Certified Specialty: No
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926

After Hours Phone: (760)
436-4558

Provider Gender: Female
NPI: 1609987619

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 295926
Board Certified Specialty: No
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926

After Hours Phone: (760)
436-4558

Provider Gender: Female
NPI: 1609987619

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM








Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA





Provider ID: 287134
Board Certified Specialty: No


D3. 專業提供者目錄

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861624181
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302454
Board Certified Specialty: No
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 Phone: (760) 944-5545
Fax: (760) 944-5545
 After Hours Phone: (760)
944-5545
Provider Gender: Female
NPI: 1205381845
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL



HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293443
Board Certified Specialty: No

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

SUTTON, BRIAN



Provider ID: 272241
Board Certified Specialty: No
 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
 Phone: (760) 598-1776
Fax: (760) 598-5744


 After Hours Phone: (760)
598-1776
Provider Gender: Male
NPI: 1629174727
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




PHYSICIANS ASSISTANT

VANETSKY, GARY

Provider ID: 269152
Board Certified Specialty: No

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
 Phone: (760) 436-2300
Fax: (760) 436-5482

 After Hours Phone: (760)
436-2300
Provider Gender: Male
NPI: 1417034489

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A

PODIATRIST


DUSTIN, ADAM

Provider ID: 275800

Board Certified Specialty: No

 326 ENCINITAS BLVD STE 100

ENCINITAS, CA 92024


 Phone: (760) 436-5533

Fax: (760) 436-0611

 After Hours Phone: (760) 436-5533

Provider Gender: Male

NPI: 1043389026

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1790915759

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297958

Board Certified Specialty: No

 354 SANTA FE DR
ENCINITAS, CA 92024


 Phone: (760) 943-8806


Fax: (760) 944-1309

 After Hours Phone: (760) 943-8806

Provider Gender: Female

NPI: 1770727034

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 300863

Board Certified Specialty: No

 326 SANTA FE DR STE 100
ENCINITAS, CA 92024


 Phone: (760) 230-8994

Fax: (760) 944-1309

 After Hours Phone: (760) 230-8994

Provider Gender: Female

NPI: 1770727034

 Provider English Spoken: Y

 Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\199

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 297957

Board Certified Specialty: No

 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

 Phone: (760) 230-8994

D3. 專業提供者目錄

Fax: (760) 944-1309

☎ After Hours Phone: (760) 230-8994

Provider Gender: Female

NPI: 1770727034

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278552

Board Certified Specialty: No

📍 1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1235369067

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No

📍 1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1861759383

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MEDICAL

CTR AT UCSF, UCSF Medical

Center At Mission Bay, UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201730

Board Certified Specialty: No

📍 1200 GARDEN VIEW RD ENCINITAS, CA 92024

☎ Phone: (858) 657-8860

☎ After Hours Phone: (858) 657-8860

Provider Gender: Male

NPI: 1265649966

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

RHOTEN, REX LLOYD

Provider ID: 301724

Board Certified Specialty: No

📍 477 N EL CAMINO REAL STE C204

ENCINITAS, CA 92024

☎ Phone: (760) 230-2256

Fax: (833) 986-0104





☎ After Hours Phone: (760) 230-2256

Provider Gender: Male

NPI: 1083792220





☐ Provider English Spoken: Y




D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
ALVARADO COMMUNITY
HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
9:00AM-4:00PM*
 *Website: N/A*

SURGERY PEDIATRIC








FAIRBANKS, TIMOTHY

Provider ID: 205497
Board Certified Specialty: No
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
Fax: (760) 944-3927
 *After Hours Phone: (760)
944-5545*
Provider Gender: Male
NPI: 1407010556
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*








SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206128
Board Certified Specialty: No
 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
Fax: (760) 944-3927
 *After Hours Phone: (760)
944-5545*
Provider Gender: Female
NPI: 1982775144
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY PLASTIC




REID, CHRISTOPHER

Provider ID: 238130
Board Certified Specialty: No
 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1982964276
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

ESCONDIDO

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299881
Board Certified Specialty: No
 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
 *Phone: (760) 738-5533*
Fax: (760) 738-3835
 *After Hours Phone: (760)
738-5533*
Provider Gender: Male
NPI: 1689092470

D3. 專業提供者目錄

☐ *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

ANESTHESIOLOGY PAIN **MANAGEMENT**

DAIRO, BRANDON

Provider ID: 300090

Board Certified Specialty: No

📍 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

☎ *Phone: (760) 738-5533*

Fax: (760) 738-3835

📞 *After Hours Phone: (760)*
738-5533

Provider Gender: Male

NPI: 1689092470

☐ *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
8:00AM-5:00PM

🌐 *Website: N/A*

ANESTHESIOLOGY PAIN **MANAGEMENT**

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No

📍 160 N DATE ST
ESCONDIDO, CA 92025

☎ *Phone: (888) 873-6220*

Fax: (888) 873-6220

📞 *After Hours Phone: (888)*
873-6220

Provider Gender: Male

NPI: 1871799528

☐ *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F*
7:00AM-4:00PM
SA 7:00AM-4:00PM

🌐 *Website: N/A*

CARDIOVASCULAR DISEASE **SERRY, ROD**

Provider ID: 296811

Board Certified Specialty: No

📍 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

☎ *Phone: (760) 743-0546*

Fax: (760) 317-9769

📞 *After Hours Phone: (760)*
743-0546

Provider Gender: Male

NPI: 1912945130

☐ *Provider English Spoken: Y*

☐ *Provider Language(s)*
Spoken: Farsi, Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

🌐 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

☎ *Phone: (760) 294-9260*

Fax: (760) 294-9274

📞 *After Hours Phone: (760)*
294-9260

Provider Gender: Female

NPI: 1699078923

☐ *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


JANNESARI, ROYA

Provider ID: 302339


Board Certified Specialty: No

 625 CITRACADO PKWY STE 108

ESCONDIDO, CA 92025


 Phone: (760) 743-1431

Fax: (760) 743-6455

 After Hours Phone: (760) 743-1431

Provider Gender: Male

NPI: 1063585099

 Provider English Spoken: Y

 Provider Language(s) Spoken: Farsi


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


KESHAVARZI, SARA

Provider ID: 305938

Board Certified Specialty: No

 488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025


 Phone: (760) 466-9800

Fax: (360) 462-2741

 After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1457996126

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


MCCARTHY, KATHRYN

Provider ID: 298143

Board Certified Specialty: No

 488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025

 Phone: (760) 466-9800

Fax: (360) 462-2741

 After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1700850781

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

WALDRUP, LA'RHONDA

Provider ID: 299259

Board Certified Specialty: No

 2185 CITRACADO PKWY ESCONDIDO, CA 92029

 Phone: (442) 281-3193

Fax: (442) 281-3197

 After Hours Phone: (442) 281-3193

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE ANESTHETIST

SEILNACHT-BERNARD, KAREN

Provider ID: 269203

Board Certified Specialty: No

 488 E VALLEY PKWY ESCONDIDO, CA 92025

 Phone: (877) 217-8505

D3. 專業提供者目錄

Fax: (760) 735-6296

📞 After Hours Phone: (877) 217-8505

Provider Gender: Female

NPI: 1861562498

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304936

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

📞 Phone: (760) 739-1543

Fax: (760) 294-9274

📞 After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1811423072

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

REDDY, NAVYA

Provider ID: 302350

Board Certified Specialty: No

📍 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

📞 Phone: (760) 743-1431

Fax: (760) 743-6455

📞 After Hours Phone: (760) 743-1431

Provider Gender: Female

NPI: 1083069611

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 306033

Board Certified Specialty: No

📍 460 N ELM ST
ESCONDIDO, CA 92025

📞 Phone: (760) 520-8100

Fax: (760) 466-1373

📞 After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1285256073

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 305691

Board Certified Specialty: No

📍 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

📞 Phone: (760) 690-2800

Fax: (949) 404-6908

📞 After Hours Phone: (760) 690-2800

Provider Gender: Male

NPI: 1942406533

🗨️ Provider English Spoken: Y

🗨️ Provider Language(s)

Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄


 Website: N/A


GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145

Board Certified Specialty: No

 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025


 Phone: (760) 690-2800


Fax: (760) 690-2801

 After Hours Phone: (760)
690-2800

Provider Gender: Male

NPI: 1942406533

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Telugu

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, PALOMAR


MEDICAL CENTER, PALOMAR
HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER /

SUPPLIER


ANDERSON, ELAINE

Provider ID: 268690


Board Certified Specialty: No

 330 W FELICITA AVE STE
A4

ESCONDIDO, CA 92025

 Phone: (760) 489-1323

Fax: (760) 489-0975

 After Hours Phone: (760)
489-1323

Provider Gender: Female

NPI: 1063558856


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No

 2130 CITRACADO PKWYSTE
220

ESCONDIDO, CA 92029

 Phone: (760) 743-4789

Fax: (760) 743-8005

 After Hours Phone: (760)
743-4789

Provider Gender: Male

NPI: 1134357007

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, PALOMAR

HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

INTERNAL MEDICINE


MALEK, MIKHAIL

Provider ID: 296831

Board Certified Specialty: No

 2130 CITRACADO PKWYSTE
220

ESCONDIDO, CA 92029


 Phone: (760) 743-0546

Fax: (760) 317-9769

 After Hours Phone: (760)
743-0546

Provider Gender: Male

NPI: 1467455212

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


BAYAT, HAMED

Provider ID: 296842

Board Certified Specialty: No

 2130 CITRACADO PKWYSTE
220





ESCONDIDO, CA 92029

 Phone: (760) 743-0546

Fax: (760) 743-8837



 After Hours Phone: (760)

D3. 專業提供者目錄




743-0546
Provider Gender: Male
NPI: 1356344196
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A





INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 296843
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
220
ESCONDIDO, CA 92029
 Phone: (760) 743-0546
Fax: (760) 743-8837
 After Hours Phone: (760)
743-0546
Provider Gender: Male
NPI: 1356344196
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A






INTERVENTIONAL CARDIOLOGY

GILBERT, CHRISTOPHER
Provider ID: 296839
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
220
ESCONDIDO, CA 92029
 Phone: (760) 430-0546
Fax: (760) 743-8837
 After Hours Phone: (760)
430-0546
Provider Gender: Male
NPI: 1487657243





 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

INTERVENTIONAL CARDIOLOGY

SAWHNEY, NAVINDER
Provider ID: 304784
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE

320
ESCONDIDO, CA 92029
 Phone: (858) 485-0130
Fax: (858) 485-9424
 After Hours Phone: (858)
485-0130
Provider Gender: Male
NPI: 1619174133
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, UCSD MEDICAL
CTR, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

INTERVENTIONAL CARDIOLOGY

SERRY, ROD
Provider ID: 304765
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
220
ESCONDIDO, CA 92029
 Phone: (760) 743-0546
Fax: (760) 317-9769
 After Hours Phone: (760)
743-0546
Provider Gender: Male
NPI: 1912945130
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Portuguese,

D3. 專業提供者目錄









Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

INTERVENTIONAL **CARDIOLOGY**


SUDHAKAR, DEEPTHI
Provider ID: 295845
Board Certified Specialty: No
 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
 *Phone: (760) 294-0480*
Fax: (619) 616-2104
 *After Hours Phone: (760)*
294-0480
Provider Gender: Female
NPI: 1811307051
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM







 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

MELBER, DORA
Provider ID: 296996
Board Certified Specialty: No
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858)*
966-6710
Provider Gender: Female
NPI: 1124413026
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**




REIMERS, REBECCA
Provider ID: 294655
Board Certified Specialty: No
 2125 CITRACADO PKWY

STE 200
ESCONDIDO, CA 92029
 *Phone: (858) 966-6710*
Fax: (858) 966-6711
 *After Hours Phone: (858)*
966-6710
Provider Gender: Female
NPI: 1801207634
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEONATAL / PERINATAL **MEDICINE**





LE, CRYSTAL
Provider ID: 283707
Board Certified Specialty: No
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 *Phone: (442) 281-3193*
Fax: (442) 281-3197
 *After Hours Phone: (442)*
281-3193
Provider Gender: Female
NPI: 1003028416
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY




D3. 專業提供者目錄

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE





SAUER, CHARLES




Provider ID: 206163
Board Certified Specialty: No
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE







SUTTNER, DENISE

Provider ID: 206137
Board Certified Specialty: No
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 283801
Board Certified Specialty: No
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-3193
Fax: (442) 281-3197
 After Hours Phone: (442)
281-3193
Provider Gender: Female
NPI: 1164572632
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

NEPHROLOGY

AL-DAHMAN, ZAID

Provider ID: 297898

Board Certified Specialty: No

631 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)
294-1660

Provider Gender: Male

NPI: 1740716828

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 277870

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 277838

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

KIM MCMANUS, OLIVIA

Provider ID: 277873

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (858) 966-5819

Fax: (760) 294-9274

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 277891

D3. 專業提供者目錄

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1487819546

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206076

Board Certified Specialty: No

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277040

Board Certified Specialty: No

1955 CITRACADO PKWY
STE 302

ESCONDIDO, CA 92029

Phone: (760) 233-1896

After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 285628

Board Certified Specialty: No

1955 CITRACADO PKWY
STE 302

ESCONDIDO, CA 92029

Phone: (760) 233-1896

After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 277041

Board Certified Specialty: No

488 E VALLEY PKWY STE
400

ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)
658-6101

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y

Cultural Competency: N

D3. 專業提供者目錄


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 285629


Board Certified Specialty: No

 488 E VALLEY PKWY STE
400

ESCONDIDO, CA 92025

 Phone: (760) 658-6101

Fax: (760) 658-6106

 After Hours Phone: (760)
658-6101

Provider Gender: Male

NPI: 1215170717


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH


Provider ID: 285518

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029


 Phone: (760) 739-2921

Fax: (760) 739-3162

 After Hours Phone: (760)
739-2921

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 277883

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029


 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 277877

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. 專業提供者目錄

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297014

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA


Provider ID: 205895

Board Certified Specialty: No

 625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025

 Phone: (760) 755-7600

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 277824

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 277833

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

D3. 專業提供者目錄


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 277869

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305307

Board Certified Specialty: No

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026

 Phone: (800) 765-2737

Fax: (619) 291-6577

 After Hours Phone: (800)
765-2737

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:30AM-4:00PM

W-F 8:30AM-1:00PM

 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 268719

Board Certified Specialty: No

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025


 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 296796

Board Certified Specialty: No

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872


Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A

D3. 專業提供者目錄

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 277537

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 277853

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 277860

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206110

Board Certified Specialty: No

625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1124230909

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297038

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600


Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1508250747


D3. 專業提供者目錄


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 277811

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 277867

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC CARDIOLOGY


HALEY, JESSICA

Provider ID: 205689

Board Certified Specialty: No

 625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 277846

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D3. 專業提供者目錄


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC CARDIOLOGY

SAH, SERENA

Provider ID: 301737

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1295042653

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 206298


Board Certified Specialty: No

 625 CITRACADO PKWY STE

100
ESCONDIDO, CA 92025
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC DERMATOLOGY

BOIKO, SUSAN

Provider ID: 277158

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1053488981

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543


Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

D3. 專業提供者目錄

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 277865

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 277914

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 277851

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297178

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1942223664

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

D3. 專業提供者目錄

JOSHI, WEENA

Provider ID: 277907

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1376862177

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

LOVEJOY, AMY

Provider ID: 277884

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MENDES, CHANTAL

Provider ID: 295670

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MINKA, GENEVIEVE

Provider ID: 277859

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1689646689

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

OZAKI, YOSHIHIRO

D3. 專業提供者目錄

Provider ID: 277902

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1467898239

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 277872

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1477626513

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 277810

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1124360565

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302802

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1407299787

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAIDYA, KAMALA

Provider ID: 205812

Board Certified Specialty: No

📍 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025

📞 Phone: (760) 739-1543

Fax: (760) 294-9274

🕒 After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1083840920

🗣️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAIDYA, KAMALA

Provider ID: 289412

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

📞 Phone: (760) 739-1543

Fax: (760) 294-9274

🕒 After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1083840920

🗣️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

WANG, EMILY

Provider ID: 277868

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

📞 Phone: (760) 739-1543

Fax: (760) 294-9274

🕒 After Hours Phone: (760) 739-1543

Provider Gender: Female

NPI: 1427142363

🗣️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC

GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301643

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

📞 Phone: (760) 294-9260

Fax: (760) 294-9274

🕒 After Hours Phone: (760) 294-9260

Provider Gender: Male

NPI: 1912369273

🗣️ Provider English Spoken: Y
🗣️ Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N




Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. 專業提供者目錄

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


PEDIATRIC


GASTROENTEROLOGY

PATHAK, SAGAR

Provider ID: 301826

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029


 *Phone: (760) 294-9260*


Fax: (760) 294-9274

 *After Hours Phone: (760)
294-9260*

Provider Gender: Male

NPI: 1700318292

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Gujarati, Spanish*

Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRICS


CAMERON, MELISSA

Provider ID: 205966

Board Certified Specialty: No

 2185 CITRACADO PKWY

ESCONDIDO, CA 92029

 *Phone: (442) 281-2850*

Fax: (442) 281-2999

 *After Hours Phone: (442)
281-2850*

Provider Gender: Female

NPI: 1902983752

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PHYSICAL MEDICINE /

REHABILITATION

RICHARDSON, HENRY


Provider ID: 295277

Board Certified Specialty: No

 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029


 *Phone: (760) 738-5533*

Fax: (909) 204-7863

 *After Hours Phone: (760)
738-5533*

Provider Gender: Male

NPI: 1407052459

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA*


*VISTA, PALOMAR MEDICAL
CENTER*

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PHYSICAL MEDICINE /


REHABILITATION

RYAN, KYLE

Provider ID: 275660

Board Certified Specialty: No

 625 CITRACADO PKWY
ESCONDIDO, CA 92025

 *Phone: (760) 294-9260*

Fax: (760) 294-9274

 *After Hours Phone: (760)
294-9260*

Provider Gender: Male

NPI: 1447645742


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*




PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300094

Board Certified Specialty: No

D3. 專業提供者目錄

 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
 Phone: (760) 738-5533
Fax: (760) 738-3835
 After Hours Phone: (760)
738-5533

Provider Gender: Female

NPI: 1477129302

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276716

Board Certified Specialty: No

 1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 743-4789
Fax: (858) 673-5187

 After Hours Phone: (760)
743-4789

Provider Gender: Female

NPI: 1215584628

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 743-1431

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

CORVINI, NICOLAS

Provider ID: 296999

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300
Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

Provider Gender: Male

NPI: 1194242461

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

CUTCHON, SYDNEY

Provider ID: 302306

Board Certified Specialty: No

 625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025

 Phone: (760) 743-1431
Fax: (760) 743-6455


 After Hours Phone: (760)

743-1431

Provider Gender: Female

NPI: 1659914240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


FUNARI, CHRISTOPHER

Provider ID: 301993


Board Certified Specialty: No

 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431

Fax: (760) 743-6455

 After Hours Phone: (760)
743-1431

Provider Gender: Male

NPI: 1982365490

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

PHYSICIANS ASSISTANT

GANGJI, SHAZMIN

Provider ID: 298110

Board Certified Specialty: No

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 462-2745

🕒 After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1346763638

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302456

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

🕒 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1205381845

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

MEHTA, NOOPUR

Provider ID: 297093

Board Certified Specialty: No

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (760) 466-1373

🕒 After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1417682931

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

MONTES, VIVIAN

Provider ID: 298090

Board Certified Specialty: No

📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2741

🕒 After Hours Phone: (760)
737-6900

Provider Gender: Female

NPI: 1881358026

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN

Provider ID: 291250

Board Certified Specialty: No

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

🕒 After Hours Phone: (760)
520-8340

Provider Gender: Male

NPI: 1639796873

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

WALSH, JOHN

Provider ID: 301971
Board Certified Specialty: No
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1386893089
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

WILE, KIMBERLY

Provider ID: 302351
Board Certified Specialty: No
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Female

NPI: 1174194641
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302390
Board Certified Specialty: No
1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (760) 738-5533
Fax: (760) 738-3835
After Hours Phone: (760) 738-5533
Provider Gender: Male
NPI: 1629674858
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PODIATRIST

ALGHURAIBI, OHOUD

Provider ID: 295998
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100

Fax: (760) 466-1373
After Hours Phone: (760) 520-8100
Provider Gender: Female
NPI: 1669842357
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PODIATRIST


LARKINS, PHILIP

Provider ID: 297044
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 462-2745
After Hours Phone: (760) 520-8100
Provider Gender: Male
NPI: 1659375103
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, ST AGNES MEDICAL CENTER, MADERA COMMUNITY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM*

 *Website: N/A*


PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No

 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025


 *Phone: (760) 480-1189*

Fax: (858) 485-1515

 *After Hours Phone: (760)
480-1189*

Provider Gender: Male

NPI: 1952963431

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PODIATRIST

READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No

 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025

 *Phone: (760) 480-1189*

Fax: (858) 485-1515

 *After Hours Phone: (760)
480-1189*

Provider Gender: Male

NPI: 1952963431

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PSYCHOLOGIST

CARLTON PENN, CORNELIA


Provider ID: 290406

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*


Fax: (360) 462-2752

 *After Hours Phone: (760)
520-8340*

Provider Gender: Female

NPI: 1891720611

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: German*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No

 460 N ELM ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

Fax: (760) 466-1373

 *After Hours Phone: (760)
520-8100*

Provider Gender: Female

NPI: 1629339015

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SA 8:00AM-0:00PM

 *Website: N/A*


PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025


 *Phone: (760) 520-8340*

Fax: (858) 633-4698

 *After Hours Phone: (760)
520-8340*

Provider Gender: Male

NPI: 1821013228

 *Provider English Spoken: Y*

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290891

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8300*

Fax: (858) 633-4698

 *After Hours Phone: (760) 520-8300*

Provider Gender: Female

NPI: 1932308442


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

TEETER-WITT, ALYSSA

Provider ID: 290779

Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 690-5900*

Fax: (858) 633-4693

 *After Hours Phone: (760) 690-5900*

Provider Gender: Female

NPI: 1932308442

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290630

Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025



 *Phone: (760) 690-5900*

Fax: (858) 633-4693

 *After Hours Phone: (760) 690-5900*

Provider Gender: Female

NPI: 1710902143

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PSYCHOLOGIST


VALLEZ-BARLAM, ANDREA

Provider ID: 290631

Board Certified Specialty: No

 488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

 *Phone: (760) 466-9800*
Fax: (858) 633-4693

 *After Hours Phone: (760) 466-9800*

Provider Gender: Female

NPI: 1710902143

 *Provider English Spoken: Y*
 *Provider Language(s)*


Spoken: German, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PSYCHOLOGIST

VAQUERO, JUANA

Provider ID: 290762

Board Certified Specialty: No

 425 N DATE ST
ESCONDIDO, CA 92025

 *Phone: (760) 520-8300*

Fax: (858) 633-4698

 *After Hours Phone: (760) 520-8300*

Provider Gender: Female

NPI: 1023459708


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

D3. 專業提供者目錄

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290634

Board Certified Specialty: No

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

🕒 After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1639362494

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PULMONARY DISEASES

QUAN, MICHELE

Provider ID: 287097

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029

☎ Phone: (760) 489-1458

Fax: (760) 489-1246

🕒 After Hours Phone: (760)
489-1458

Provider Gender: Female

NPI: 1629462882

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: REDLANDS
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): **VOLPP, PAUL**

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221090

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

☎ Phone: (760) 739-3371

Fax: (760) 739-3779

🕒 After Hours Phone: (760)
739-3371

Provider Gender: Female

NPI: 1053348920

🗉 Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

Provider ID: 221103

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

☎ Phone: (760) 739-3371

Fax: (760) 739-3779

🕒 After Hours Phone: (760)
739-3371

Provider Gender: Male

NPI: 1225186232

🗉 Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-4:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 220041

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

☎ Phone: (760) 739-3371


Fax: (760) 739-3779

🕒 After Hours Phone: (760)
739-3371

D3. 專業提供者目錄

Provider Gender: Male

NPI: 1841233947

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,


SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283206

Board Certified Specialty: No

 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

 Phone: (760) 839-7370

Fax: (858) 429-7938

 After Hours Phone: (760)
839-7370

Provider Gender: Male

NPI: 1427456151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE

Provider ID: 252473

Board Certified Specialty: No

 1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

 Phone: (760) 233-9655

Fax: (760) 233-9648

 After Hours Phone: (760)
233-9655

Provider Gender: Female

NPI: 1194217133


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 8\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
7:00AM-6:00PM


 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296931

Board Certified Specialty: No

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

SPEECH PATHOLOGIST


CALDERON MORALES, ASTRID

Provider ID: 305583


Board Certified Specialty: No

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1619501186

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296924

Board Certified Specialty: No

 500 LA TERRAZA BLVD STE

D3. 專業提供者目錄

150
ESCONDIDO, CA 92025

☎ Phone: (877) 757-8353

Fax: (818) 357-2505

🕒 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

🌐 Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296577

Board Certified Specialty: No

📍 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

☎ Phone: (877) 757-8353

Fax: (818) 357-2505

🕒 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1205443769

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Provider ID: 245226

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM

🌐 Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304606

Board Certified Specialty: No

📍 1045 E PENNSYLVANIA
AVE

ESCONDIDO, CA 92025

☎ Phone: (760) 884-4500

Fax: (619) 483-3997

🕒 After Hours Phone: (760)
884-4500

Provider Gender: Male

NPI: 1437470762

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

GROVE, JAY

Board Certified Specialty: No

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

☎ Phone: (760) 300-3647

Fax: (760) 482-1316

🕒 After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC

Provider ID: 277831

Board Certified Specialty: No

📍 2125 CITRACADO PKWY
STE 100





ESCONDIDO, CA 92029

☎ Phone: (760) 480-8770

Fax: (760) 480-8811

🕒 After Hours Phone: (760)



D3. 專業提供者目錄

480-8770
Provider Gender: Male
NPI: 1013048412
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC




KNUTSON, THOMAS



Provider ID: 296851
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789
Fax: (760) 743-4779
 After Hours Phone: (760)
743-4789
Provider Gender: Male
NPI: 1962409938
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A



SURGERY ORTHOPEDIC

SHARP, LORRA

Provider ID: 304761
Board Certified Specialty: No
 2130 CITRACADO PKWYSTE
220
ESCONDIDO, CA 92029
 Phone: (760) 743-0546
Fax: (760) 317-9769
 After Hours Phone: (760)
743-0546




Provider Gender: Female
NPI: 1689689176
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish




Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC





SHARP, LORRA

Provider ID: 296808
Board Certified Specialty: No
 2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789
Fax: (858) 385-1690
 After Hours Phone: (760)
743-4789

Provider Gender: Female
NPI: 1689689176
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA
VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN


Provider ID: 206130
Board Certified Specialty: No
 625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1982775144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FALLBROOK


CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290943

Board Certified Specialty: No

 1309 S MISSION RD
FALLBROOK, CA 92028


 Phone: (760) 690-5900

Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: TU-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


HAMED, JACQUELYN

Provider ID: 302366

Board Certified Specialty: No

 1328 S MISSION RD

FALLBROOK, CA 92028


 Phone: (760) 451-4730

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4730

Provider Gender: Female

NPI: 1578260758

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028


 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298086

Board Certified Specialty: No

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STOJANOVSKA, JOVANA

D3. 專業提供者目錄

Provider ID: 301367

Board Certified Specialty: No

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 451-4700

After Hours Phone: (760)
451-4730

Provider Gender: Female

NPI: 1215638499

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118

Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH
8:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 299407

Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028

Phone: (760) 723-6200

Fax: (760) 414-3892

After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-4:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 296010

Board Certified Specialty: No

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 457-4700

After Hours Phone: (760)
451-4730

Provider Gender: Female

NPI: 1013349919

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No

1309 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 690-5900

Fax: (760) 731-1063

After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1841627759

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CHIROPRACTOR

HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No

1309 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 690-5900

Fax: (760) 731-1063

D3. 專業提供者目錄

☎ After Hours Phone: (760) 690-5900

Provider Gender: Female

NPI: 1275542193

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

CHRISTIE, PATRICIA

Provider ID: 299526

Board Certified Specialty: No

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720

Fax: (760) 457-4700

☎ After Hours Phone: (760) 451-4720

Provider Gender: Female

NPI: 1881625531

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:30PM

🌐 Website: N/A

OPTOMETRIST

BULLUM, ANTHONY

Provider ID: 290329

Board Certified Specialty: No

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4730

Fax: (760) 457-4700

☎ After Hours Phone: (760) 451-4730

Provider Gender: Male

NPI: 1992773956

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRICS

ROBINSON, DAISY

Provider ID: 298311

Board Certified Specialty: No

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200

Fax: (760) 414-3892

☎ After Hours Phone: (760) 723-6200

Provider Gender: Female

NPI: 1659389740

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-4:00PM

🌐 Website: N/A

HEMET

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272953

Board Certified Specialty: No

📍 3853 W STETSON AVE STE
200

HEMET, CA 92545

☎ Phone: (951) 225-6802

☎ After Hours Phone: (951) 225-6802

Provider Gender: Female

NPI: 1841771664

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

IMPERIAL BEACH

CERTIFIED NURSE

PRACTITIONER

ALBARRAN-SLOVIN, MELODY

Provider ID: 299329

Board Certified Specialty: No

📍 949 PALM AVE

IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

D3. 專業提供者目錄

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1740953249

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BORRAJERO, OBEL

Provider ID: 303242

Board Certified Specialty: No

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1093280588

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310

Board Certified Specialty: No

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1174223655

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296845

Board Certified Specialty: No

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

POPE, KATILYNN

Provider ID: 305980

Board Certified Specialty: No

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

Fax: (619) 628-5550

☎ After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1174232748

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

THYGERSEN, ALAYSA

D3. 專業提供者目錄

Provider ID: 297909

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1760107767

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

BROWNING, ELIZABETH

Provider ID: 298122

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1821431057

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1124288873

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 298099

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1780609990

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-8:00PM
TU-W 8:30AM-5:00PM
TH 8:30AM-8:00PM
F 8:30AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304530

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 332-4200

Fax: (613) 332-4220

After Hours Phone: (619)
332-4200

Provider Gender: Male

NPI: 1336894724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

Website: N/A

D3. 專業提供者目錄

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 301973

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305015

Board Certified Specialty: No

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286783
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301995
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000

Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301109
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298365
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH


Provider ID: 301429
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531

Board Certified Specialty: No

 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932


 Phone: (619) 482-3000


Fax: (619) 332-4220

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

 Website: N/A

LA JOLLA


ANESTHESIOLOGY


ALEXANDER, BRENTON

Provider ID: 242302

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1811366644

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238904

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


CURRAN, BRIAN

Provider ID: 239003

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710373642


 Provider English Spoken: Y
Cultural Competency: N

D3. 專業提供者目錄

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269503

Board Certified Specialty: No

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female


NPI: 1609353465


 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280469

Board Certified Specialty: No

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1831166560

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

HOSALKAR, HETAL

Provider ID: 243370

Board Certified Specialty: No

 *9415 CAMPUS POINT DR
LA JOLLA, CA 92093*



 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1861556821

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Farsi, Gujarati,*

Hindi

Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY


HYLTON, DIANA

Provider ID: 241736

Board Certified Specialty: No

 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1932527751

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR, SOUTHWEST*


*HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST*

*HEALTHCARE RANCHO
SPRINGS HOSPITAL*



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


ANESTHESIOLOGY


MEYER, MEGAN

Provider ID: 239608

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720473044

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


NGUYEN, QUOC SY

Provider ID: 242189

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


OKAMOTO, VINCENT

Provider ID: 245952

Board Certified Specialty: No


 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952338709

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, ALVARADO
HOSPITAL LLC, SOUTHWEST
HEALTHCARE INLAND VALLEY


HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


OSWALD, JESSICA

Provider ID: 239601

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


SHAW, SUSANNA

Provider ID: 255317

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1063685477
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243295
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1447516414
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1386856821
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246750
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1699057885
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271683
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female

D3. 專業提供者目錄

NPI: 1003261595


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283690

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493


 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284578

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659802965

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY **YOUNAN, LAWRENCE**

Provider ID: 240871
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1922432475

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY PAIN **MANAGEMENT**

CASTELLANOS, JOEL
Provider ID: 243554
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1700296514
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **KEEN, WILLIAM**

Provider ID: 291303
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800)
926-8372
Provider Gender: Male
NPI: 1962561571
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

CARDIOVASCULAR DISEASE **MIZZELL, ANNA**

Provider ID: 214021
Board Certified Specialty: No
9434 MEDICAL CENTER DR

FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1851561021
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A


CARDIOVASCULAR DISEASE **PHREANER, NICHOLAS**

Provider ID: 224864
Board Certified Specialty: No
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1023373040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000

Board Certified Specialty: No

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811382815

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304136

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304141

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135

D3. 專業提供者目錄

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265131

Board Certified Specialty: No

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (858) 657-8000

Fax: (858) 657-8387

 After Hours Phone: (858)
657-8000

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


AGYEMANG, ALBERTA

Provider ID: 265130

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


BOUTELLE, AMY


Provider ID: 243485

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609117704

 Provider English Spoken: Y

Cultural Competency: N

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


BRADY, KATELYN

Provider ID: 209017

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952797540

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243717

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037



Phone: (800) 926-8273



After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851749253

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CAPOZZI, JENNIFER

Provider ID: 241030

Board Certified Specialty: No



 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CONNER, PAMELA

Provider ID: 299932

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNER, PAMELA

Provider ID: 299931

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

D3. 專業提供者目錄

926-8273
Provider Gender: Female
NPI: 1770558967
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279834
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1609081710
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CZYPULL, MONICA

Provider ID: 284662
Board Certified Specialty: No
📍 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
☎ Phone: (858) 554-1212
Fax: (858) 795-1195
🕒 After Hours Phone: (858)
554-1212
Provider Gender: Female
NPI: 1831784842

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 253691
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (858) 249-6800
Fax: (858) 657-6420
🕒 After Hours Phone: (858)
249-6800

Provider Gender: Female
NPI: 1679850671
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 238922
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 657-7600
🕒 After Hours Phone: (858)
657-7600
Provider Gender: Female
NPI: 1679850671
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE **PRACTITIONER**

DE DIOS, SARAH

Provider ID: 300052
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1528632742

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

CERTIFIED NURSE **PRACTITIONER**

DIMAIRA, FRANCESCA

Provider ID: 245580
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female

NPI: 1346670718
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE **PRACTITIONER**

DIMAIRA, FRANCESCA

Provider ID: 245579
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346670718

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE **PRACTITIONER**

DRISCOLL, KARRIE

Provider ID: 286376
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (858) 822-6277
Fax: (858) 228-1731
After Hours Phone: (858)
822-6277
Provider Gender: Female
NPI: 1396085098

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE **PRACTITIONER**

GARTH, MELISSA

Provider ID: 268991
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

D3. 專業提供者目錄

NPI: 1689232977


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GARTH, MELISSA

Provider ID: 268992

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE PRACTITIONER

GIOVANNETTI, ERIN

Provider ID: 276002

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013317767

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299464

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299465

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


D3. 專業提供者目錄

PRACTITIONER

GOMEZ, LESLIE


Provider ID: 299469

Board Certified Specialty: No

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299470

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HANNA, LINDSAY

Provider ID: 284967

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1699257907

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HARKNESS, RUMIKO

Provider ID: 208840

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487785093

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

IYER, VICTORIA


Provider ID: 265624

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1871738864

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

JONES, CHRISTA

Provider ID: 275564

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (800) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396371431

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KORMANIK, PATRICIA

Provider ID: 282070

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


LANE, KIMBERLY

Provider ID: 301604

Board Certified Specialty: No

 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

 Phone: (858) 453-5944

Fax: (858) 429-7925

 After Hours Phone: (858)
453-5944

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

LEE, HEE

Provider ID: 274644

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497275705

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MATTHESS, JANETTE

Provider ID: 287645

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

D3. 專業提供者目錄

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MATTHESS, JANETTE

Provider ID: 287644

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299645

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299646

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299651

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299650

Board Certified Specialty: No

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1952627176

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291420

Board Certified Specialty: No

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8372

Provider Gender: Female

NPI: 1184386864

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE


PRACTITIONER


NACOSTE, LAKEISHA

Provider ID: 272935

Board Certified Specialty: No

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 Phone: (858) 822-5210

 After Hours Phone: (858) 822-5210

Provider Gender: Female

NPI: 1194139634


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


PAULSON, KERRY

Provider ID: 201269

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (619) 543-3000

 After Hours Phone: (619) 543-3000

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1518363407

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


RALEIGH, DEBORAH


Provider ID: 215016

Board Certified Specialty: No

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689006876

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

ROCHE, CHELSEA

Provider ID: 270706

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063040384

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291446

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1649934126


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


SRILASAK, MICHELE

Provider ID: 281855

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210795

Board Certified Specialty: No

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TRUJILLO, DALE

Provider ID: 278428

Board Certified Specialty: No

9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003104423

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1902368319








Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED REGISTERED NURSE ANESTHETIST







ALFONSO, ALVIN

Provider ID: 256375
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1952653404
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED REGISTERED NURSE ANESTHETIST







AMADOR, LINDSAY

Provider ID: 291387
Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1003556184
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CERTIFIED REGISTERED NURSE ANESTHETIST








APPLEGET, JOSEPH

Provider ID: 239603
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1568980472
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RIVERSIDE COMMUNITY HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*



CERTIFIED REGISTERED NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240764
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1174893358
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED REGISTERED NURSE ANESTHETIST

BURROWS, TERENCE

Provider ID: 256695
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1023194560
 *Provider English Spoken: Y*
Cultural Competency: N


D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

DOLLAND, STEVEN

Provider ID: 280553

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KERN
MEDICAL CENTER, UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED

NURSE ANESTHETIST

FERRITER, STACY

Provider ID: 265296

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

GARCIA, CALVIN


Provider ID: 217366

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427419944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299906

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA


IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291443

Board Certified Specialty: No

 9300 CAMPUS POINT DR

D3. 專業提供者目錄

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194134114
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE
Provider ID: 291403
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487213500
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

SACKS, BRENT
Provider ID: 278004
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982133591
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE


CHOI, NATHALIE
Provider ID: 301713
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073241618
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A


CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL
Provider ID: 210017
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR STE 200 LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL):  After Hours Phone: (858) 657-8745

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GREAR MANN, MELISSA


Provider ID: 210051

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUNTHER, HOPE

Provider ID: 210040


Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (858) 657-8745

Provider Gender: Female
NPI: 1285667741

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU
8:00AM-5:00PM

W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER


Provider ID: 210057

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER


Provider ID: 210056

Board Certified Specialty: No

 9300 CAMPUS POINT DR


LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


NATHAN, CARLY

Provider ID: 301046


Board Certified Specialty: No

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1235670977
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

PERDION, KAREN

Provider ID: 210136
Board Certified Specialty: No
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1518916857
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

PERDION, KAREN

Provider ID: 210135
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (858) 657-8745
🕒 After Hours Phone: (858)
657-8745
Provider Gender: Female
NPI: 1518916857
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270914
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 657-7000
Fax: (888) 539-8781
🕒 After Hours Phone: (858)
657-7000
Provider Gender: Male
NPI: 1134326895
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF

USC, USC VERDUGO HILLS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269292
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811289093
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los
Angeles General Medical
Center, TEMECULA VALLEY
HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271138

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271135

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (858) 249-6800

Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801207006

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

BLACK, NICHOLAS








Provider ID: 284415

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200






LA JOLLA, CA 92037


D3. 專業提供者目錄

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1154852689
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
 Website: N/A

EMERGENCY MEDICINE







CASTELLANO, TIFFANY

Provider ID: 271611
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (858) 249-6800
 Fax: (858) 404-9226
 After Hours Phone: (858)
249-6800
Provider Gender: Female
NPI: 1063893063
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427476597
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429
Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427476597

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE

GALUST, HENRIK

Provider ID: 300053
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932696093
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

EMERGENCY MEDICINE


GOODRICH, ANDREW

Provider ID: 271625

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245688415

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239880

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (858) 657-6400


 After Hours Phone: (858)

657-6400

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 278988

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 242545

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE






HOGUE, BRENNIA

Provider ID: 301710

Board Certified Specialty: No






 9300 CAMPUS POINT DR

D3. 專業提供者目錄

LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043705296
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

EMERGENCY MEDICINE








HOGUE, BRENNIA

Provider ID: 300006
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043705296
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 Website: N/A





EMERGENCY MEDICINE




HORNBEAK, KIRSTEN

Provider ID: 240023
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205214442
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE






KRESHAK, ALLYSON

Provider ID: 257564
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194758219
 Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG








Provider ID: 283844
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A




EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283846
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE






LI, JINGHONG



Provider ID: 255938
Board Certified Specialty: No
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 Phone: (858) 657-7125
Fax: (858) 657-7107
 After Hours Phone: (858)

657-7125
Provider Gender: Female
NPI: 1619014479
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE









LI, JINGHONG

Provider ID: 255937
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-7125
Fax: (858) 657-7107
 After Hours Phone: (858)
657-7125
Provider Gender: Female
NPI: 1619014479
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A



EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 283150
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1396270278
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
 Website: N/A

EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 246900
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1366761959

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280658

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 539-8781

Fax: (888) 539-8781

☎ After Hours Phone: (800)
539-8781

Provider Gender: Male

NPI: 1003355629

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, EL

CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280660

Board Certified Specialty: No

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003355629

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, EL

CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239796

Board Certified Specialty: No

📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

☎ Phone: (858) 249-6800

☎ After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1871732214

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285608

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273



Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1366478372

D3. 專業提供者目錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE




PARK, JAY


Provider ID: 285609
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1366478372




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

EMERGENCY MEDICINE

QUENZER, FAITH




Provider ID: 243284
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1295112670



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UNIVERSITY
HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 8:00AM-8:00PM*
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
 *Website: N/A*

EMERGENCY MEDICINE

RUDOLF, FRANCES



Provider ID: 240160
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 657-7000*
 *After Hours Phone: (858)*
657-7000
Provider Gender: Female
NPI: 1821487430

 *Provider English Spoken: Y*
 *Provider Language(s)*




Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 240450
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 *Phone: (858) 249-6800*
 *After Hours Phone: (858)*
249-6800
Provider Gender: Male
NPI: 1457747883

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 8:00AM-8:00PM*
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
 *Website: N/A*

EMERGENCY MEDICINE

SELTZER, JUSTIN

D3. 專業提供者目錄

Provider ID: 283135

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447791843

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 300008

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871099333

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1336502095

N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

SUPAT, BENJAMIN

Provider ID: 299907

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1376772905

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

WINKLER, GARRET

Provider ID: 271416

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269938

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269937
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1225425697

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1528564150

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

EMERGENCY MEDICINE


YU, ELAINE

Provider ID: 299985
Board Certified Specialty: Yes
 8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1528564150

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES



BOEDER, SCHAFFER

Provider ID: 255612
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1477808285


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

GUERIN, CHRIS

Provider ID: 284645
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1275648875

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL
CTR, UCSD LA JOLLA JOHN

D3. 專業提供者目錄


SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606

Board Certified Specialty: No



 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ENDOCRINOLOGY

METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 962-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
962-8273

Provider Gender: Female

NPI: 1932324175

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287778

Board Certified Specialty: No

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

PETTUS, JEREMY

Provider ID: 303286

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225234982

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES



SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 專業提供者目錄

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1518163799


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE


CHEN, ALICE

Provider ID: 207166


Board Certified Specialty: No


 9300 MEDICAL CENTER
DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE


CHEN, ALICE

Provider ID: 207165

Board Certified Specialty: No


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE


JOLICOEUR, MEGAN

Provider ID: 300056

Board Certified Specialty: Yes

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1114366192

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272836

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 543-2347

Fax: (858) 657-7259

 After Hours Phone: (619) 543-2347

Provider Gender: Male

NPI: 1861626814

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

D3. 專業提供者目錄

Provider ID: 270448

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 925-8273

Fax: (888) 539-8781

After Hours Phone: (800)
925-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270449

Board Certified Specialty: No

9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271043

Board Certified Specialty: No

9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205240959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271042

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1205240959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299953

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

D3. 專業提供者目錄

HASAN, AWS

Provider ID: 299952

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

HOLMER, ARIELA

Provider ID: 273216

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083032544

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283897

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 252368

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


GASTROENTEROLOGY


TSAI, MATTHEW

Provider ID: 252369

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY


Provider ID: 300023

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300025

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


ASIMAKOPOULOS, FOTIOS


Provider ID: 246594

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR


LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Male

NPI: 1518134923

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303057

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

D3. 專業提供者目錄

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No

📍 3960 HEALTH SCIENCES
DRIVE

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144431230

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202662

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU-SA

8:00AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202664

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1982995809

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202663

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

PARK, SOO

Provider ID: 257202
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1821351198

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE

Provider ID: 215010
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female

NPI: 1700120102
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

STEWART, TYLER

Provider ID: 243920
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1699110676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA





Provider ID: 245574
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)



D3. 專業提供者目錄

926-8273
Provider Gender: Female
NPI: 1811200652
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA


Provider ID: 301057
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1538346317
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301059
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1538346317

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

INFECTIOUS DISEASE







RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299947
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1659720555

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982018545
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

INTERNAL MEDICINE


BORDIN-WOSK, TALYA


Provider ID: 273985

D3. 專業提供者目錄

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801184973

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD


*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (760) 471-9186

Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD


*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERNAL MEDICINE


CHENG, GEORGE

Provider ID: 247640

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

INTERNAL MEDICINE


DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INTERNAL MEDICINE

GELBERG, ANNA

Provider ID: 285639

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104004258

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Russian*

Cultural Competency: N

*Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL*

CENTER, HOAG MEMORIAL

D3. 專業提供者目錄


HOSPITAL PRESBYTERIAN,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


HOGARTH, MICHAEL

Provider ID: 214385

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UC
DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326427014

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


JABBOUR, MOUSSA

Provider ID: 256658

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1730507872


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

D3. 專業提供者目錄

Provider ID: 274004

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,

Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238623

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238624

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274409

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

Provider English Spoken: Y

D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



INTERNAL MEDICINE

MAJITHIA, AMIT

Provider ID: 255881
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1801091459
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

INTERNAL MEDICINE




MARTINEZ, ARMANDO

Provider ID: 291422
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8372*
 *Fax: (888) 539-8781*
 *After Hours Phone: (800)*
926-8372
Provider Gender: Male
NPI: 1598261091
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

INTERNAL MEDICINE









NOKES, BRANDON

Provider ID: 287581
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *Fax: (888) 539-8781*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1487040051
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

INTERNAL MEDICINE

POTOK, OLIVIA



Provider ID: 272707
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *Fax: (888) 539-8781*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1073951323
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 專業提供者目錄

 Phone: (619) 471-9186
 After Hours Phone: (619) 471-9186


Provider Gender: Female
NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1538351408


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SMITH, CHELSEY

Provider ID: 239921


Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274470

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Male
NPI: 1033572995

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259536

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1730133976




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999


American Sign Language (ASL):
N

D3. 專業提供者目錄

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*




INTERNAL MEDICINE

YADLAPATI, RENA

Provider ID: 238587
Board Certified Specialty: No
 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female


NPI: 1548597784

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*




INTERNAL MEDICINE

YADLAPATI, RENA

Provider ID: 238586
Board Certified Specialty: No
 *9350 CAMPUS POINT DR
LA JOLLA, CA 92037*
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female


NPI: 1548597784

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283025
Board Certified Specialty: No
 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*




Provider Gender: Female
NPI: 1346636453



 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT*




PROVIDER
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

ZHANG, SHERRY


Provider ID: 272658
Board Certified Specialty: No
 *9300 CAMPUS POINT DR
LA JOLLA, CA 92037*
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1588198147

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Mandarin*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*





 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL




Provider ID: 275993
Board Certified Specialty: No
 *9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037*





D3. 專業提供者目錄

 Phone: (858) 657-8530
 After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1861623506
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC




Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A



INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 300062
Board Certified Specialty: No
 9434 MEDICAL CENTER DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1457770240
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERVENTIONAL CARDIOLOGY




DAMANI, SAMIR
Provider ID: 303097
Board Certified Specialty: No
 9850 GENESEE AVE STE 650 LA JOLLA, CA 92037
 Phone: (858) 800-2480
Fax: (858) 216-1908
 After Hours Phone: (858) 800-2480
Provider Gender: Male
NPI: 1457379372

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT



PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY **GOVEA, ALAYN**

Provider ID: 300030
Board Certified Specialty: No
 9434 MEDICAL CENTER DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972997104

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LAKEWOOD REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INTERVENTIONAL CARDIOLOGY

TAUB, PAM
Provider ID: 277682
Board Certified Specialty: No
 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346355161

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

TAUB, PAM

Provider ID: 277681

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346355161

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 210604

Board Certified Specialty: No

📍 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

☎ Phone: (858) 657-8530

Fax: (858) 657-8814

☎ After Hours Phone: (858) 657-8530

Provider Gender: Male

NPI: 1063701068

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL

MEDICINE

BALLAS, JERASIMOS

Provider ID: 209561

Board Certified Specialty: No

📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1871767384

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL

MEDICINE

EMERUWA, UKACHI

Provider ID: 300009

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1245627421

☑ Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D3. 專業提供者目錄

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


MATERNAL AND FETAL MEDICINE


HULL, ANDREW

Provider ID: 209482

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 657-8745*

 *After Hours Phone: (858) 657-8745*

Provider Gender: Male

NPI: 1902862121

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE


LAURENT, LOUISE

Provider ID: 208639

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1770532707

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE


MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hungarian, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


MATERNAL AND FETAL MEDICINE


MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 657-8745*

 *After Hours Phone: (858) 657-8745*

Provider Gender: Male

NPI: 1184682379

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209383

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 657-7200*

 *After Hours Phone: (858)
657-7200*

Provider Gender: Male

NPI: 1013965748

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


MATERNAL AND FETAL MEDICINE


WOLF, RICHARD

Provider ID: 209252

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1497713846

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283287

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 249-5800*

 *After Hours Phone: (858)
249-5800*

Provider Gender: Female

NPI: 1528454188

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

DEL ROSARIO, PAMELA

Provider ID: 295001

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (858) 249-5800*

Fax: (858) 249-5839

 *After Hours Phone: (858)
249-5800*

Provider Gender: Female

NPI: 1952691941

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

D3. 專業提供者目錄


CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294252

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206207

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206209

Board Certified Specialty: No

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)

626-4123

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOPA, NANA

Provider ID: 299893

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No

 9300 CAMPUS POINT DR
STE 8
LA JOLLA, CA 92037

 Phone: (858) 657-7000

Fax: (858) 249-5839

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285931

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1942253356

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE


Provider ID: 301824

Board Certified Specialty: No

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206062

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (619) 543-3812

 After Hours Phone: (858)
249-5800

Provider Gender: Male

NPI: 1205047545

Provider English Spoken: Y

Cultural Competency: N




Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206170

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1649433103


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303908

Board Certified Specialty: No

 9300 CAMPUS POINT DR
FL 8

LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES


Provider ID: 303907

Board Certified Specialty: No

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Male

NPI: 1538388988


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

BEVINS, ELIZABETH

Provider ID: 277726

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 專業提供者目錄

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


COUGHLIN, DAVID

Provider ID: 240950

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1740543784


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 246701

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8540

 After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1053326710

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


LEE, DAVID

Provider ID: 246264

Board Certified Specialty: No



 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Korean
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


LEGER, GABRIEL

Provider ID: 247609

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720367899

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

QAYOUMI, WALI

D3. 專業提供者目錄

Provider ID: 284369

Board Certified Specialty: No

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

Phone: (858) 822-5881

Fax: (888) 539-8781

After Hours Phone: (858)
822-5881

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284371

Board Certified Specialty: No

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Phone: (619) 284-3746

Fax: (888) 579-8781

After Hours Phone: (619)
284-3746

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

SCHULTE, JESSICA

Provider ID: 284819

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (858) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467870576

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BONDRE, IOANA

Provider ID: 284310

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1326579863

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

BONDRE, IOANA

Provider ID: 284311

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326579863

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291323

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291324

Board Certified Specialty: No

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335

Board Certified Specialty: No

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR

D3. 專業提供者目錄

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730507567

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY **GUPTA, PRATIMA**

Provider ID: 257546
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891749842

📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY **HARVEY, SCOTT**

Provider ID: 278916
Board Certified Specialty: No
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 923-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 923-8273
Provider Gender: Male
NPI: 1457662868

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY **HARVEY, SCOTT**

Provider ID: 278918
Board Certified Specialty: No
📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1457662868
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OBSTETRICS / GYNECOLOGY **HOANG, MAI**

Provider ID: 208295
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104143593

📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

D3. 專業提供者目錄

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242752

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271558

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271559

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 286230

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

D3. 專業提供者目錄

MACKAY, GILLIAN

Provider ID: 200964

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303062

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285739

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

Fax: (888) 539-8781

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1467585521

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

MELLENDEZ, ARIANA

Provider ID: 299920

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299976

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1447530696


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299977

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PINSON, KELSEY

Provider ID: 284285

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1841722485

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


UNIVERSITY HSP OF SAN


DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284295

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284297

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

D3. 專業提供者目錄

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


RIVAS, RENEE

Provider ID: 284296

Board Certified Specialty: No

 9333 GENESEE AVE STE 340

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


THOMSON, SAMANTHA

Provider ID: 285175


Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689013468

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1689013468

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes



Min/Max Age: 16\999

American Sign Language (ASL):








N

 Accessibility: CONTACT PROVIDER




D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST **AMARAL, MARGARET**








Provider ID: 258303
Board Certified Specialty: No
 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
 Phone: (858) 657-6879
Fax: (858) 657-6873
 After Hours Phone: (858)
657-6879
Provider Gender: Female
NPI: 1689874521
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST **COLLINS, RESENIA**

Provider ID: 258356
Board Certified Specialty: No
 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
 Phone: (858) 657-6879
Fax: (858) 657-6873
 After Hours Phone: (858)
657-6879
Provider Gender: Female
NPI: 1184936718







 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST **HARRIS, LISA**

Provider ID: 258362
Board Certified Specialty: No
 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
 Phone: (858) 657-6879
Fax: (858) 657-6873
 After Hours Phone: (858)
657-6879
Provider Gender: Female
NPI: 1336445063
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST **MUNCADA, CAESAR**

Provider ID: 288724
Board Certified Specialty: No
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1790268100
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OCCUPATIONAL THERAPIST **SMITH, EMILY**

Provider ID: 258537
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (855) 543-0333
Fax: (858) 657-6873
 After Hours Phone: (855)
543-0333
Provider Gender: Female
NPI: 1417337403
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290

Fax: (888) 539-8781

 After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-5:00PM
SA 7:45AM-2:00PM

 Website: N/A


OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272802

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


CHIU, STEPHAN

Provider ID: 297586

Board Certified Specialty: No

 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

 Phone: (858) 457-3010

Fax: (858) 457-0028

 After Hours Phone: (858)
457-3010

Provider Gender: Male

NPI: 1053846956

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

JIN, MAN

Provider ID: 299954

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073010120

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OPHTHALMOLOGY

JIN, MAN

Provider ID: 299956

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781








 After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1073010120
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 215055
Board Certified Specialty: No
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497792220
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299965



Board Certified Specialty: No
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1427102979

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog



Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A



OPHTHALMOLOGY

RAHMATNEJAD, KAMRAN

Provider ID: 300039
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273




Provider Gender: Male
NPI: 1699268292

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY



RAHMATNEJAD, KAMRAN

Provider ID: 300041
Board Certified Specialty: No
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1699268292

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A


OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305303
Board Certified Specialty: No
 9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
 Phone: (858) 457-3050
Fax: (619) 296-4622
 After Hours Phone: (858)
457-3050
Provider Gender: Female

D3. 專業提供者目錄

NPI: 1629509336

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SCHONBACH, ETIENNE

Provider ID: 284432

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073040580

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299935

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPHTHALMOLOGY


SHEILS, CATHERINE

Provider ID: 305309

Board Certified Specialty: No

 9834 GENESEE AVE STE
200

LA JOLLA, CA 92037

 Phone: (858) 457-3050

Fax: (858) 457-0851

 After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-4:00PM

W-F 8:30AM-1:00PM

 Website: N/A


OPHTHALMOLOGY

SONG, DELU

Provider ID: 284425

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437689536

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

TOPILOW, NICOLE

Provider ID: 284348

Board Certified Specialty: No

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1215468376

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296798

Board Certified Specialty: No

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

☎ After Hours Phone: (800) 898-2020

Provider Gender: Female

NPI: 1780935650

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:15PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

🌐 Website: N/A

OPTOMETRIST

HOO, PAMELA

Provider ID: 269621

Board Certified Specialty: No

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 822-4438

☎ After Hours Phone: (858) 534-6290

Provider Gender: Female

NPI: 1275566010

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299914

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1861164642

☐ Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Website: N/A


OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299915

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1861164642

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OPTOMETRIST

KIM, PHILIP

Provider ID: 287909

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (858) 534-6290

Fax: (858) 534-8293

 After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1962817981

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

VO, ANDREW

Provider ID: 304148

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OPTOMETRIST


VO, ANDREW

Provider ID: 201311

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290

 After Hours Phone: (858)
534-6290

Provider Gender: Male

NPI: 1790291565

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

OPTOMETRIST

YU, CAROL

Provider ID: 258078

Board Certified Specialty: No

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301682

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301681

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299636

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299637

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299633

D3. 專業提供者目錄

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299458

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (858) 822-6197

Fax: (858) 822-6198

🕒 After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1881652972

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299463

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299459

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299584

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297330

🗣 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299585

Board Certified Specialty: No

 *9300 CAMPUS POINT DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1932297330

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299581

Board Certified Specialty: No

 *9350 CAMPUS POINT DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1932297330

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299580

Board Certified Specialty: No

 *9400 CAMPUS POINT DR*
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1932297330

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299564

Board Certified Specialty: No

 *3855 HEALTH SCIENCES*
DR

LA JOLLA, CA 92093
 *Phone: (858) 657-8590*

 *After Hours Phone: (858)*
657-8590

Provider Gender: Male

NPI: 1588988919

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299570

Board Certified Specialty: No

 *9300 CAMPUS POINT DR*
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1588988919


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299565

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1588988919


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299566

Board Certified Specialty: Yes

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIEDMAN, RICK

Provider ID: 299533

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM


GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299529

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273



Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y
Cultural Competency: N





Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL



D3. 專業提供者目錄

MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY





FRIEDMAN, RICK


Provider ID: 299534
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982708558
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY







FRIEDMAN, RICK

Provider ID: 299528
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982708558
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH



Provider ID: 299562
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1003825571
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299563
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 專業提供者目錄

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A



OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299558

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1003825571


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A



OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298398


Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1144583931

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298395

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298394

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

D3. 專業提供者目錄


NPI: 1144583931

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272958

Board Certified Specialty: No

 9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144583931


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299577

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299578

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299574

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299573

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y


D3. 專業提供者目錄

Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299517

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299513

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299512

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY


HOM, DAVID

Provider ID: 299516

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1659305027

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

OTOLARYNGOLOGY





HUSSEMAN, JACOB

Provider ID: 301051

Board Certified Specialty: No





 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. 專業提供者目錄

 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124034053
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY







KARI, ELINA

Provider ID: 294828
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 857-8590
 After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299448
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A



OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299442
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 857-8590
 After Hours Phone: (858) 857-8590
Provider Gender: Female
NPI: 1780860536
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299444
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1780860536

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1780860536

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299484

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1891858379

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299479

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1891858379

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299478

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1891858379

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
 Website: N/A

OTOLARYNGOLOGY


MAGIT, ANTHONY

Provider ID: 299483

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299594

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299589

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

MATSUOKA, AKIHIRO


Provider ID: 299588

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299593

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781


D3. 專業提供者目錄

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299604

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299608

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


VAHABZADEH-HAGH, ANDREW


Provider ID: 299504

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6197

 After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299510

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299506

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299505

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299643

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

D3. 專業提供者目錄

Provider ID: 299644
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1346270816
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299638
Board Certified Specialty: No
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 657-8590
Fax: (858) 657-8682
🕒 After Hours Phone: (858)
657-8590

Provider Gender: Female
NPI: 1346270816
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299640
Board Certified Specialty: Yes
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1346270816
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299612
Board Certified Specialty: No
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (858) 657-8590
🕒 After Hours Phone: (858)
657-8590

Provider Gender: Male
NPI: 1366590853
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

D3. 專業提供者目錄

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299611

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-8590

📞 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1366590853

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299613

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781



📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260






☐ Provider English Spoken: Y


D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 242138
Board Certified Specialty: No
 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
 *Phone: (858) 657-8590*
 *After Hours Phone: (858) 657-8590*
Provider Gender: Female
NPI: 1619237260
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL): N
 *Website: N/A*
8:00AM-5:00PM

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO


Provider ID: 201304
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1043571045

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*

 *Website: N/A*
8:00AM-5:00PM



PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 275750
Board Certified Specialty: No
 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1043571045

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PATHOLOGY ANATOMIC CLINICAL

D3. 專業提供者目錄

ALLEN, ELIZABETH

Provider ID: 275757

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174814065

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275722

Board Certified Specialty: No

9444 MEDICAL CENTER DR CTR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184674145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 275746

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

DON, MICHELLE

Provider ID: 247149

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-4410

After Hours Phone: (858)
249-4410

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

D3. 專業提供者目錄

DON, MICHELLE

Provider ID: 275816

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ELKIND, JAE

Provider ID: 284903

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922497700

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 243965

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

HU, JINGJING

Provider ID: 243966

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

ROMA, ANDRES

Provider ID: 275827

Board Certified Specialty: No

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 275782

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679521579

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275840

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174757181

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE

Provider ID: 275814

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC CLINICAL

ZARE, SOMAYE

Provider ID: 203172

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ZHANG, HAIYAN

Provider ID: 275841

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


AINSWORTH, DELISSA


Provider ID: 243366

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

 Provider English Spoken: Y

 Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT



ALBRIGHT, KELSEY

Provider ID: 284764

Board Certified Specialty: No


 9300 CAMPUS POINT DR

D3. 專業提供者目錄

LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730605486

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SALINAS VALLEY MEMORIAL HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT


ARMEEN, GARY

Provider ID: 247036

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BRUECKNER, TAMMIE

Provider ID: 255557

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 243349

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

COOKISH, DAVID

Provider ID: 286591

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215338884

📄 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

CRIFE, TAYLOR

Provider ID: 210983

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659827087

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

DEMASCO, MICHAEL

Provider ID: 278969

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1467926295

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


DEMOOR, PATRICIA

Provider ID: 212879

Board Certified Specialty: No


 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477721702

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DOUGHERTY, CLARA

Provider ID: 269170

Board Certified Specialty: No

 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

 Phone: (858) 453-5944


Fax: (858) 429-7925

 After Hours Phone: (858)

453-5944

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


DOUGHERTY, CLARA

Provider ID: 295925

Board Certified Specialty: No

 9850 GENESEE AVE STE
440

LA JOLLA, CA 92037


 Phone: (858) 453-5944

Fax: (858) 429-7925

 After Hours Phone: (858)
453-5944

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


GOTTESFELD, STEVEN

Provider ID: 305278

Board Certified Specialty: No

 9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

 Phone: (858) 500-2480

Fax: (858) 216-1908

 After Hours Phone: (858)
500-2480

Provider Gender: Male

NPI: 1427068972

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


HASEGAWA, CHRIS

Provider ID: 247205

Board Certified Specialty: No

 8939 VILLA LA JOLLA DR
STE 110

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. 專業提供者目錄

926-8273
Provider Gender: Male
NPI: 1225698962
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287135
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861624181
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287136
Board Certified Specialty: No
📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1861624181
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431
Board Certified Specialty: No
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431
Board Certified Specialty: No
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1114459765
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429
Board Certified Specialty: No
📍 9400 CAMPUS POINT DR

D3. 專業提供者目錄

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114459765
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450
Board Certified Specialty: No
📍 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114459765
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 279334
Board Certified Specialty: No
📍 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
☎ Phone: (800) 826-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 826-8273
Provider Gender: Male
NPI: 1114459765
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265147
Board Certified Specialty: No
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (858) 554-1212
🕒 After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1427681022
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265146
Board Certified Specialty: No
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 888-9268
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 888-9268
Provider Gender: Female
NPI: 1427681022
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

D3. 專業提供者目錄

LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279015

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027

Board Certified Specialty: No

📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305025

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280612

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1104371251

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258039

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1386032308

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278017

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497129860

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278016

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497129860

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293440

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

☎ Phone: (858) 822-7967

Fax: (858) 822-6395

☎ After Hours Phone: (858) 822-7967

Provider Gender: Male

NPI: 1386791028

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

D3. 專業提供者目錄

Provider ID: 293442

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8276

Fax: (888) 539-8784

After Hours Phone: (800)
926-8276

Provider Gender: Male

NPI: 1386791028

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283583

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283584

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253254

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-5540

After Hours Phone: (619)
543-5540

Provider Gender: Female

NPI: 1265960256

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253255

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

After Hours Phone: (858)
657-7876

Provider Gender: Female

NPI: 1265960256

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SAIKHON, TALIA

Provider ID: 293439

Board Certified Specialty: No

8910 VILLA LA JOLLA DR
STE 100





LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781






After Hours Phone: (800)



D3. 專業提供者目錄

926-8273
Provider Gender: Female
NPI: 1699263905
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

SANCHEZ, MICHAEL





Provider ID: 206907
Board Certified Specialty: No
 8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1184135006
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SCHWARTZEL, KEVIN

Provider ID: 214276
Board Certified Specialty: No
 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1104277847
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
 Website: N/A

PHYSICIANS ASSISTANT






SHAUL, SHERA

Provider ID: 247976
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8373
 After Hours Phone: (800)
926-8373
Provider Gender: Female
NPI: 1336659507

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247975
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1336659507
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305010
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124593926

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 277072

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942724042

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299597

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299601

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

☑ Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278202

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (800) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


BAILIS, JESSICA

Provider ID: 300043

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C101


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1760739049

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST


BOOTH, CHRISTOPHER


Provider ID: 209117

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C101


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568893162

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BOOTH, CHRISTOPHER

Provider ID: 209118

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568893162

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 302876

Board Certified Specialty: No

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 240034

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 258988

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037

Phone: (858) 246-1654

After Hours Phone: (858)
246-1654

Provider Gender: Male

NPI: 1780620906

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CLAUDAT, KIMBERLY

Provider ID: 285237

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1699200949

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CRANDAL, BRENT

Provider ID: 291463

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

D3. 專業提供者目錄

Provider Gender: Male

NPI: 1588739452


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255479

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 302888

Board Certified Specialty: No

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


EICHEN, DAWN

Provider ID: 259524

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (858) 246-1654

Fax: (858) 246-3181

 After Hours Phone: (858)
246-1654

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

EICHEN, DAWN

D3. 專業提供者目錄

Provider ID: 245715

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

LASSWELL, EVE

Provider ID: 208260

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013483635

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273640

Board Certified Specialty: No

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA

Provider ID: 273224

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 534-7792

Fax: (619) 471-9017

After Hours Phone: (858)
534-7792

Provider Gender: Female

NPI: 1043441165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

MENDEZ, ANDRES

Provider ID: 279058

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841482692

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

D3. 專業提供者目錄

MEDICAL CTR, UCSD LA JOLLA Fax: (888) 539-8781


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


REED, KRISTIE

Provider ID: 291395

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1679869556

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


PSYCHOLOGIST

REED, KRISTIE

Provider ID: 302867

Board Certified Specialty: No

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679869556

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


TARLE, STEPHANIE

Provider ID: 303116

Board Certified Specialty: No

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659920403


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

ZLATAR, ZVINKA

Provider ID: 272712

Board Certified Specialty: No

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497139059

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299925

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES


JOSHUA, JISHA

Provider ID: 238060

Board Certified Specialty: No


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300054

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

RADIOLOGY DIAGNOSTIC BERMAN, ZACHARY

Provider ID: 269319

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

RADIOLOGY DIAGNOSTIC BRANCH, CODY

Provider ID: 283676

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622


 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE


Provider ID: 303056

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858) 554-1212*

Provider Gender: Female

NPI: 1619156635

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283227

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1427430511

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299993

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1639553613

 *Provider English Spoken: Y*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286955

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1497721724

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201290

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037





 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female




NPI: 1255457941

D3. 專業提供者目錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*






RADIOLOGY DIAGNOSTIC **GRISSOM, MURRAY**

Provider ID: 271568
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1720465396
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, Stanford Health Care,

STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*








RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**

Provider ID: 282790
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1992120026

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Khmer, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC

HORKY, LAURA

Provider ID: 241854
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1598967812
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **HORKY, LAURA**


Provider ID: 241855
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1598967812
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299959

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Los Angeles
General Medical Center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781


 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ST MARY
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC


SADAT, SAYED

Provider ID: 299967

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1679000806

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC


SCHULTZ, HEATHER

Provider ID: 240343

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1871910810

 *Provider English Spoken: Y*


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299950

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1134570641


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283311

Board Certified Specialty: No

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1851746382

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303050

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1992919666

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240406

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268545

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299990

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300036

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

VAHDOT, NOUSHIN

Provider ID: 300069

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1790146611


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL

THERAPIST


BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1285061390

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST


BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1285061390

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL

THERAPIST


BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1780018416

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST


CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1891260238

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1891260238

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1689321416

 *Provider English Spoken: Y*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1477018729

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST


NUTHALL, KAITLIN

Provider ID: 202327

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1992210090

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

REGISTERED PHYSICAL


THERAPIST

NUTHALL, KAITLIN

Provider ID: 258431

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

D3. 專業提供者目錄

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1992210090

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 207559

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

Provider ID: 258372

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

☎ Phone: (855) 543-0333

Fax: (858) 657-6873

☎ After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1831539337

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE

Provider ID: 206546

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

TRIMM, CASSIDY

Provider ID: 258442

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (855) 543-0333

Fax: (858) 657-6873

☎ After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478


☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  9350 CAMPUS POINT DR
STE LLD

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


TRIMM, CASSIDY

Provider ID: 258443

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):  9350 CAMPUS POINT DR
LA JOLLA, CA 92037

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


VASQUEZ, BENJAMIN

Provider ID: 258480

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST


VASQUEZ, BENJAMIN

Provider ID: 200968

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


WILLIAMS, STACY

Provider ID: 258496

Board Certified Specialty: No

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

D3. 專業提供者目錄

YU, AUDRINE

Provider ID: 258481

Board Certified Specialty: No

9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1639271208

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286388
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (858) 822-6100
After Hours Phone: (858)
822-6100
Provider Gender: Female
NPI: 1518163005

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278551
Board Certified Specialty: No
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

NPI: 1235369067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286371
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801812656

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211904
Board Certified Specialty: No
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1770742264

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

AL-NOURI, OMAR





Provider ID: 211905
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1770742264
Provider English Spoken: Y


D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY GENERAL




ARMANI, AVA

Provider ID: 282142
Board Certified Specialty: No
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (858) 822-6100*
 *After Hours Phone: (858) 822-6100*
Provider Gender: Female
NPI: 1861759383
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY GENERAL




CLARY, BRYAN

Provider ID: 202568
Board Certified Specialty: No
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1982787131

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY GENERAL






HORGAN, SANTIAGO

Provider ID: 286380
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (619) 471-0755*
 *After Hours Phone: (619)*

471-0755
Provider Gender: Male
NPI: 1932297231
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201728
Board Certified Specialty: No
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (619) 471-0755*
 *After Hours Phone: (619) 471-0755*
Provider Gender: Male
NPI: 1265649966
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **SANTORELLI, JARRETT**

Provider ID: 272304
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1033529201
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **VASCULAR**

BARLEBEN, ANDREW
Provider ID: 275373
Board Certified Specialty: No
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **VASCULAR**

BARLEBEN, ANDREW
Provider ID: 275371
Board Certified Specialty: Yes
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **VASCULAR**

GAFFEY, ANN
Provider ID: 287012
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1316232010
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL **VASCULAR**

HOWE, STEVEN
Provider ID: 206760
Board Certified Specialty: No
9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (858) 657-7777

D3. 專業提供者目錄

Fax: (858) 657-5058

☎ After Hours Phone: (858) 657-7777

Provider Gender: Male

NPI: 1497702740

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 275678

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
STE 2A

LA JOLLA, CA 92037

☎ Phone: (619) 543-5540

Fax: (619) 287-7663

☎ After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1093730251

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS

Provider ID: 214126

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (858) 657-8540

☎ After Hours Phone: (858)
657-8540

Provider Gender: Male

NPI: 1497067573

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244070

Board Certified Specialty: No

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270282

Board Certified Specialty: No

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

D3. 專業提供者目錄


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


MARSHALL, LAWRENCE

Provider ID: 244149

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No

 9300 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244133

Board Certified Specialty: Yes

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037



Phone: (800) 926-8273



After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


ANDRY, JAMES

Provider ID: 302085

Board Certified Specialty: No

 9834 GENESEE AVE STE
228

LA JOLLA, CA 92037



 Phone: (858) 824-1703

Fax: (858) 455-6473

 After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC

BLAIS, MICAH

Provider ID: 299944

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972867562

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

D3. 專業提供者目錄

BLAIS, MICAH

Provider ID: 299945

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972867562

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277947

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 244460

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8181

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284787

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL



CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203177
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER



 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1730542747
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC



GOEB, YANNICK

Provider ID: 284792
Board Certified Specialty: No
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y
 Provider Language(s)

Spoken: German, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303194
Board Certified Specialty: No
 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
 Phone: (858) 455-9942
Fax: (858) 455-6473

 After Hours Phone: (858)
455-9942

Provider Gender: Male

NPI: 1396185161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302103

Board Certified Specialty: No

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037

Phone: (858) 455-9942
Fax: (858) 455-6473

After Hours Phone: (858)
455-9942

Provider Gender: Male

NPI: 1497751457

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285246

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285245

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO

Provider ID: 299908

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407380512

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO

Provider ID: 299910

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1407380512

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 224796

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC


BOYS, JOSHUA

Provider ID: 243533

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7777

 After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1114368990

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


GRAMINS, DANIEL

Provider ID: 210047

Board Certified Specialty: Yes

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164495750

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297

Board Certified Specialty: No

 9434 MEDICAL CENTER DR
FL 1





LA JOLLA, CA 92037




D3. 專業提供者目錄

 Phone: (858) 647-8817
Fax: (858) 853-9878
 After Hours Phone: (858) 647-8817
Provider Gender: Male
NPI: 1033683719
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC




KEARNS, MARK





Provider ID: 274296
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8817
Fax: (888) 539-8781
 After Hours Phone: (858) 657-8817
Provider Gender: Male
NPI: 1033683719
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS

Provider ID: 210576
Board Certified Specialty: No
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871752956

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





SURGERY THORACIC

RAMIREZ, ALFREDO

Provider ID: 256390
Board Certified Specialty: No
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1003829417
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY HSP OF SAN
DIEGO CO, UCSD MEDICAL
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291383
Board Certified Specialty: No
 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291382

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291381

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


UROLOGY

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 657-7876

Fax: (888) 539-8781

 After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1902814379


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 249-3534

 After Hours Phone: (858)

249-3534

Provider Gender: Male

NPI: 1073758652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 專業提供者目錄

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes

📍 8860 CENTER DR STE 400
LA MESA, CA 91942

☎ Phone: (619) 229-1995

Fax: (619) 229-1109

🕒 After Hours Phone: (619)
229-1995

Provider Gender: Male

NPI: 1093730814

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA

Provider ID: 265393

Board Certified Specialty: No

📍 5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

☎ Phone: (619) 461-6130

Fax: (619) 461-3108

🕒 After Hours Phone: (619)
461-6130

Provider Gender: Male

NPI: 1710996384

🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Kannada, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

Provider ID: 290704

Board Certified Specialty: Yes

📍 8851 CENTER DR STE 304
LA MESA, CA 91942

☎ Phone: (619) 867-0557

Fax: (619) 867-0558

🕒 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,
GROSSMONT HOSPITAL,

ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, TRI CITY MEDICAL

CTR, SCRIPPS MERCY

HOSPITAL CHULA VISTA, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 295955

Board Certified Specialty: No

8851 CENTER DR STE 501
LA MESA, CA 91942

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)
697-2456

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

RESELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE BELLOMO, THOMAS

Provider ID: 205600

Board Certified Specialty: No

5565 GROSSMONT
CENTER DR STE 2 STE 2

LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206106

Board Certified Specialty: No

5565 GROSSMONT
CENTER DR STE 2 STE 2

LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942

 Phone: (619) 713-5375


Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

HEARING AID DEALER / SUPPLIER


ANDERSON, ELAINE

Provider ID: 268693

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR

LA MESA, CA 91942


 Phone: (619) 589-5414

Fax: (619) 589-7391

 After Hours Phone: (619)
589-5414

Provider Gender: Female

NPI: 1063558856

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY


BATRA, REEMA

Provider ID: 58612

Board Certified Specialty: No

 5555 GROSSMONT
CENTER DR

LA MESA, CA 91942


 Phone: (619) 644-3030

Fax: (619) 644-3638

 After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1629286505

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Mandarin
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY


BATRA, REEMA

Provider ID: 295692

Board Certified Specialty: No

 5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

 Phone: (619) 644-3030


Fax: (619) 644-3638

 After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1629286505

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Mandarin

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

HEMATOLOGY / ONCOLOGY **MEDIC, IGOR**

Provider ID: 295654

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3638

After Hours Phone: (619)
644-3030

Provider Gender: Male

NPI: 1154618593

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Serbian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY **MEDIC, IGOR**

Provider ID: 119509

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3638

After Hours Phone: (619)

644-3030

Provider Gender: Male

NPI: 1154618593

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Serbian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY **ZU, KAI**

Provider ID: 43199

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3638

After Hours Phone: (619)
644-3030

Provider Gender: Male

NPI: 1164583639

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY **ZU, KAI**

Provider ID: 295711

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 644-3030

Fax: (619) 644-3638

After Hours Phone: (619)
644-3030

Provider Gender: Male

NPI: 1164583639

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

INTERVENTIONAL **CARDIOLOGY**

TAGHIZADEH, BEHZAD

D3. 專業提供者目錄

Provider ID: 269161

Board Certified Specialty: No

8851 CENTER DR STE 405
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1275514986

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

YELLEN, LAURENCE

Provider ID: 269173

Board Certified Specialty: No

8851 CENTER DR STE 405
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1477680551

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL

MEDICINE

ADAMI, REBECCA

Provider ID: 272676

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 244873

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

D3. 專業提供者目錄

Provider ID: 296997

Board Certified Specialty: No

8851 CENTER DR STE 201
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294654

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294656

Board Certified Specialty: No

8851 CENTER DR STE 201
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277317

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277305

Board Certified Specialty: No

5555 GROSSMONT
CENTER DR

D3. 專業提供者目錄

LA MESA, CA 91942
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277384
Board Certified Specialty: No
📍 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858)

966-6710
Provider Gender: Female
NPI: 1992847131
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEPHROLOGY

LEININGER, DANIEL

Provider ID: 293480
Board Certified Specialty: No
📍 8851 CENTER DR STE 505
LA MESA, CA 91942
☎ Phone: (619) 461-3880
Fax: (619) 461-3895
🕒 After Hours Phone: (619) 461-3880
Provider Gender: Male
NPI: 1164956264
☑ Provider English Spoken: Y




Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, ALVARADO COMMUNITY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 9:00AM-5:00PM
🌐 Website: N/A

NEPHROLOGY

LEININGER, DANIEL

Provider ID: 295640
Board Certified Specialty: No
📍 8851 CENTER DR STE 505
LA MESA, CA 91942
☎ Phone: (619) 461-3880
Fax: (619) 461-3895
🕒 After Hours Phone: (619) 461-3880
Provider Gender: Male
NPI: 1164956264
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, ALVARADO COMMUNITY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

D3. 專業提供者目錄

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
9:00AM-5:00PM*
 *Website: N/A*


NEUROLOGY

MOHAMMAD, AHMAD SHAH

Provider ID: 39868

Board Certified Specialty: No

 *8851 CENTER DR STE 307
LA MESA, CA 91942*


 *Phone: (619) 337-7900*


Fax: (619) 337-7902

 *After Hours Phone: (619)
337-7900*

Provider Gender: Male

NPI: 1902973472

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Arabic, Farsi,
French, German, Pushto,
Spanish*

Cultural Competency: N

Hospital Affiliation:


*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


OPHTHALMOLOGY

CHIU, STEPHAN

Provider ID: 297585

Board Certified Specialty: No

 *5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942*


 *Phone: (619) 465-2020*


Fax: (619) 698-1189

 *After Hours Phone: (619)
465-2020*

Provider Gender: Male

NPI: 1053846956

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: RONALD

*REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED*

*CTR, SCRIPPS MEMORIAL
HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

OPHTHALMOLOGY


HAIGHT, BRUCE

Provider ID: 269112

Board Certified Specialty: No

 *5565 GROSSMONT
CENTER DR BLDG 3 STE
551*

LA MESA, CA 91942

 *Phone: (800) 898-2020*

Fax: (844) 897-3788

 *After Hours Phone: (800)
898-2020*

Provider Gender: Male

NPI: 1427029628

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8:00AM-4:00PM*

TU-W 8:30AM-4:00PM

TH 8:00AM-4:00PM

F 8:00AM-0:00PM

 *Website: N/A*

OPHTHALMOLOGY


HAIGHT, BRUCE

Provider ID: 305885

Board Certified Specialty: No

 *5565 GROSSMONT
CENTER DR BLDG 3 STE
551*

LA MESA, CA 91942

 *Phone: (800) 898-2020*

Fax: (844) 897-3788

 *After Hours Phone: (800)
898-2020*

Provider Gender: Male

NPI: 1427029628

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

D3. 專業提供者目錄

 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM
 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 295984

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942

 Phone: (619) 463-0331

Fax: (619) 463-0138

 After Hours Phone: (619)
463-0331

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-4:00PM
F 8:00AM-0:00PM


 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No

 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297578

Board Certified Specialty: No

 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942



 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-4:30PM


 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes

 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-4:30PM
 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 288652

Board Certified Specialty: No

 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

 Phone: (619) 464-3353

Fax: (619) 464-6720

 After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1730675927

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, Sharp


Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302431

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

 Phone: (619) 464-3353


Fax: (619) 464-6720

 After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1518456508

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 245753

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1285014498


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC EMERGENCY MEDICINE







GROSS, MATTHEW

Provider ID: 297177

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942

D3. 專業提供者目錄




 Phone: (619) 713-5375
Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
Provider Gender: Male
NPI: 1942223664
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

JOSHI, WEENA


Provider ID: 262233
Board Certified Specialty: No
 5565 GROSSMONT CENTER DR STE 2 STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1376862177
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




PEDIATRIC EMERGENCY

MEDICINE

MINKA, GENEVIEVE

Provider ID: 205335
Board Certified Specialty: No
 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 Phone: (619) 713-5375
Fax: (619) 713-5379
 After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s) Spoken: French

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE

OZAKI, YOSHIHIRO



Provider ID: 241925
Board Certified Specialty: No

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942

 Phone: (619) 713-5375
Fax: (619) 713-5379

 After Hours Phone: (619) 713-5375


Provider Gender: Male
NPI: 1467898239

 Provider English Spoken: Y
 Provider Language(s) Spoken: Japanese

Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY

MEDICINE

PARKER, SHERINE

Provider ID: 205786
Board Certified Specialty: No

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942

 Phone: (619) 713-5375
Fax: (619) 713-5379

D3. 專業提供者目錄

☎ After Hours Phone: (619) 713-5375

Provider Gender: Female

NPI: 1477626513

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 285936

Board Certified Specialty: No

📍 5555 GROSSMONT CENTER DR
LA MESA, CA 91942

☎ Phone: (858) 966-6710
Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female
NPI: 1619359718

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

WANG, EMILY

Provider ID: 265955

Board Certified Specialty: No

📍 5565 GROSSMONT CENTER DR STE 2 BLDG 2
LA MESA, CA 91942

☎ Phone: (619) 713-5375
Fax: (619) 713-5379

☎ After Hours Phone: (619) 713-5375

Provider Gender: Female
NPI: 1427142363

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRICS

CLAY, CORRIE

Provider ID: 278807

Board Certified Specialty: No

📍 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

☎ Phone: (619) 464-6434
Fax: (619) 464-5109

☎ After Hours Phone: (619) 464-6434

Provider Gender: Female
NPI: 1437207750

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM
SA 11:30AM-3:30PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301590

Board Certified Specialty: No

📍 8851 CENTER DR STE 501

D3. 專業提供者目錄

LA MESA, CA 91942
☎ Phone: (619) 697-2456
Fax: (858) 429-7930
🕒 After Hours Phone: (619) 697-2456
Provider Gender: Female
NPI: 1609987619
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

ELO, KRISTIN

Provider ID: 295736
Board Certified Specialty: No
📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942
☎ Phone: (619) 644-3030
Fax: (619) 644-3083
🕒 After Hours Phone: (619) 644-3030
Provider Gender: Female
NPI: 1164664306
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital,

GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

ELO, KRISTIN

Provider ID: 241862
Board Certified Specialty: No
📍 5555 GROSSMONT CENTER DR LA MESA, CA 91942
☎ Phone: (619) 644-3030
Fax: (619) 644-3083
🕒 After Hours Phone: (619) 644-3030
Provider Gender: Female
NPI: 1164664306
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital,

GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA

Provider ID: 306005

Board Certified Specialty: No
📍 7339 EL CAJON BLVD STE I LA MESA, CA 91942
☎ Phone: (619) 698-0606
Fax: (619) 698-0609
🕒 After Hours Phone: (619) 698-0606
Provider Gender: Female
NPI: 1437822434
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HINKLE, CORINNE


Provider ID: 305425
Board Certified Specialty: No
📍 7339 EL CAJON BLVD STE I LA MESA, CA 91942
☎ Phone: (619) 698-0606
Fax: (619) 698-0609
🕒 After Hours Phone: (619) 698-0606
Provider Gender: Female
NPI: 1508451949
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Valleywise Health Medical Center
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No

 8851 CENTER DR STE 505
LA MESA, CA 91942

 Phone: (619) 461-3880

Fax: (619) 461-3895

 After Hours Phone: (619)
461-3880

Provider Gender: Male

NPI: 1164729125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

VAWTER, ERIN


Provider ID: 295755

Board Certified Specialty: No

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942


 Phone: (619) 644-3030

Fax: (619) 644-3638

 After Hours Phone: (619)
644-3030

Provider Gender: Female

NPI: 1376988691

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

WHITE, KYLE


Provider ID: 302382

Board Certified Specialty: No

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942


 Phone: (619) 464-3353

Fax: (619) 464-7509

 After Hours Phone: (619)
464-3353

Provider Gender: Male

NPI: 1922768860

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619)
740-4500

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221089

Board Certified Specialty: No

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619)

D3. 專業提供者目錄

740-4500
Provider Gender: Female
NPI: 1053348920
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221104
Board Certified Specialty: No
 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4500
Fax: (619) 740-8499
 After Hours Phone: (619)
740-4500
Provider Gender: Male
NPI: 1225186232
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 220040
Board Certified Specialty: No
 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4500
Fax: (619) 740-8499
 After Hours Phone: (619)
740-4500
Provider Gender: Male
NPI: 1841233947

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN

Provider ID: 243960
Board Certified Specialty: No
 8860 CENTER DR STE 100
LA MESA, CA 91942
 Phone: (619) 460-2770
Fax: (619) 460-2774
 After Hours Phone: (619)
460-2770

Provider Gender: Male

NPI: 1831144005

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN




Provider ID: 243959
Board Certified Specialty: No
 8881 FLETCHER PKWY STE
102
LA MESA, CA 91942
 Phone: (619) 460-2770
Fax: (619) 460-2774
 After Hours Phone: (619)
460-2770

Provider Gender: Male





NPI: 1831144005

Provider English Spoken: Y

D3. 專業提供者目錄





Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 7:00AM-5:00PM*
 *Website: N/A*


RADIOLOGY DIAGNOSTIC **VENKATESH, VIJAY**

Provider ID: 269659
Board Certified Specialty: No
 8860 CENTER DR STE 100
LA MESA, CA 91942
 *Phone: (619) 460-2770*
Fax: (619) 460-2774
 *After Hours Phone: (619) 460-2770*
Provider Gender: Male
NPI: 1689627085
 *Provider English Spoken: Y*
Cultural Competency: N






Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **VENKATESH, VIJAY**

Provider ID: 269660
Board Certified Specialty: No
 8881 FLETCHER PKWY STE 102
LA MESA, CA 91942
 *Phone: (619) 460-2770*
Fax: (619) 460-2774
 *After Hours Phone: (619) 460-2770*
Provider Gender: Male
NPI: 1689627085
 *Provider English Spoken: Y*
Cultural Competency: N









Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

RHEUMATOLOGY **KOTHA, ROSHAN**

Provider ID: 63454
Board Certified Specialty: No
 8860 CENTER DR STE 400
LA MESA, CA 91942
 *Phone: (619) 229-1995*
Fax: (619) 229-1109
 *After Hours Phone: (619) 229-1995*
Provider Gender: Female
NPI: 1417117839
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Spanish, Telugu*
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:00PM*
 *Website: N/A*

SURGERY ORTHOPEDIC **BALLARD, BROOKE**

Provider ID: 262205
Board Certified Specialty: No
 8860 CENTER DR STE 350
LA MESA, CA 91942
 *Phone: (619) 286-9480*
Fax: (619) 286-4568
 *After Hours Phone: (619) 286-9480*
Provider Gender: Female
NPI: 1841447950
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 9:00AM-5:00PM*
 *Website: N/A*

D3. 專業提供者目錄

Email:
tracy@alvaradoortho.com

UROLOGY

SALMASI, AMIRALI

Provider ID: 129643

Board Certified Specialty: No

8851 CENTER DR STE 501
LA MESA, CA 91942

Phone: (619) 697-2456

Fax: (858) 429-7930

After Hours Phone: (619)
697-2456

Provider Gender: Male

NPI: 1609187962

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

LAKE ELSINORE

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY

Provider ID: 290293

Board Certified Specialty: No

30195 FRASER DR
LAKE ELSINORE, CA 92530

Phone: (951) 252-2720

Fax: (760) 414-3892

After Hours Phone: (951)
252-2720

Provider Gender: Male

NPI: 1215008552

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SHARP MEMORIAL HOSPITAL,

POMONA VALLEY HOSP MED

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290211

Board Certified Specialty: No

30195 FRASER DR
LAKE ELSINORE, CA 92530

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290239

Board Certified Specialty: No

30195 FRASER DR
LAKE ELSINORE, CA 92530

Phone: (951) 252-2720

Fax: (760) 414-3892

After Hours Phone: (951)
252-2720

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290319

Board Certified Specialty: No

30195 FRASER DR
LAKE ELSINORE, CA 92530

D3. 專業提供者目錄

☎ Phone: (951) 525-2720

Fax: (760) 414-3892

📞 After Hours Phone: (951) 525-2720

Provider Gender: Female

NPI: 1497161236

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

LAKESIDE

CHIROPRACTOR

CASTRO, DAVID

Provider ID: 305617

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (858) 218-3000

Fax: (360) 462-2744

📞 After Hours Phone: (858) 218-3000

Provider Gender: Male

NPI: 1841557733

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

FULKS, ZACKARY

Provider ID: 301145

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (619) 390-9975

Fax: (360) 462-2744

📞 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1407562531

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

FULKS, ZACKARY

Provider ID: 303813

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (619) 390-9975

Fax: (360) 462-2744

📞 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1407562531

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 257549

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (619) 390-9975

Fax: (858) 633-4690

📞 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1306916994

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303816

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

☎ Phone: (619) 390-9975

Fax: (360) 462-2744

D3. 專業提供者目錄

📞 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1487781035

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 301344

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

📞 Phone: (619) 390-9975

Fax: (360) 462-2744

📞 After Hours Phone: (619) 390-9975

Provider Gender: Male

NPI: 1487781035

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

BRUNETTO, HEIDI

Provider ID: 290407

Board Certified Specialty: No

📍 10039 VINE ST
LAKESIDE, CA 92040

📞 Phone: (619) 390-9975

Fax: (858) 633-4690

📞 After Hours Phone: (619) 390-9975

Provider Gender: Female

NPI: 1023250453

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-5:00PM

🌐 Website: N/A

MENIFEE

PHYSICIANS ASSISTANT

SMITH, KELLI

Provider ID: 272954

Board Certified Specialty: No

📍 30420 HAUN RD
MENIFEE, CA 92584

📞 Phone: (951) 676-4193

📞 After Hours Phone: (951) 676-4193

Provider Gender: Female

NPI: 1841771664

🗨️ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738

Board Certified Specialty: No

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

📞 Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932527751

🗨️ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN


Provider ID: 287655

D3. 專業提供者目錄

Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562


 Phone: (951) 696-6000

Fax: (951) 677-9757

 After Hours Phone: (951)
696-6000

Provider Gender: Male

NPI: 1417243239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HEAD, KRISTIN


Provider ID: 268658

Board Certified Specialty: No

 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KLEMENCIC, TAHNEE

Provider ID: 302627

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1134802283

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MIRACLE, ANGELYN

Provider ID: 300259

Board Certified Specialty: No

 25170 HANCOCK AVE STE
200

MURRIETA, CA 92562

 Phone: (951) 461-9300

Fax: (951) 461-9399

 After Hours Phone: (951)
461-9300

Provider Gender: Female

NPI: 1144539842

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:30AM-0:00PM
M-F 8:00AM-5:00PM

SA 8:30AM-0:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SNYDER, MICHELLE

Provider ID: 210676

Board Certified Specialty: No

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1851561054


 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA


Provider ID: 210794
Board Certified Specialty: No

 41011 CALIFORNIA OAKS RD STE 104 MURRIETA, CA 92562

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1346696044

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*



 *Website: N/A*

EMERGENCY MEDICINE


LI, JINGHONG

Provider ID: 255941
Board Certified Specialty: No

 25500 MEDICAL CENTER DR MURRIETA, CA 92562

 *Phone: (951) 696-6000*
 *After Hours Phone: (951) 696-6000*


Provider Gender: Female
NPI: 1619014479

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275994
Board Certified Specialty: No

 28062 BAXTER RD MURRIETA, CA 92563

 *Phone: (951) 290-4000*
Fax: (888) 539-8781

 *After Hours Phone: (951) 290-4000*


Provider Gender: Male
NPI: 1861623506

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

INTERVENTIONAL CARDIOLOGY

WETTERSTEN, NICHOLAS

Provider ID: 210605
Board Certified Specialty: No

 41011 CALIFORNIA OAKS RD STE 104 MURRIETA, CA 92562

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*




Provider Gender: Male
NPI: 1063701068

 *Provider English Spoken: Y*

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296992



Board Certified Specialty: No

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562
 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hungarian, Spanish*


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296988

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562



 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female



NPI: 1124413026


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hungarian, Spanish*


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*


MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294652

Board Certified Specialty: No

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562

 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female

NPI: 1801207634

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294649

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female

NPI: 1801207634

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301820

Board Certified Specialty: No

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6000

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264676

Board Certified Specialty: Yes

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6000

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297071

Board Certified Specialty: No

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6000

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1811151848

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

GOLD, JEFFREY

Provider ID: 283334

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1568773984


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

NEUROLOGY

JINDAL, ANUJA

Provider ID: 215521

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY

SAHAGIAN, MICHELLE

Provider ID: 283166

Board Certified Specialty: No

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

GOLD, JEFFREY

Provider ID: 215691

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1568773984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 215442

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1528353521

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA

Provider ID: 215666

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1174870067

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

D3. 專業提供者目錄


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA

Provider ID: 273227

Board Certified Specialty: No

 25405 HANCOCK AVE STE
217

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 215606

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN


Provider ID: 267317

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297010

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL


HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No


 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 215685

Board Certified Specialty: No


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

BLISS, MORGAN


Provider ID: 215684

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

D3. 專業提供者目錄

Provider ID: 215332

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244898

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1400

After Hours Phone: (951)
600-1400

Provider Gender: Female

NPI: 1952740177

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No

25170 HANCOCK AVE

MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH

HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536




Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS

D3. 專業提供者目錄

ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY





PATEL, VIJAY

Provider ID: 297034
Board Certified Specialty: No
 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1508250747
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A



PEDIATRIC ALLERGY / IMMUNOLOGY







COLLINS, CATHLEEN

Provider ID: 215733
Board Certified Specialty: No
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1205128089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY




BORQUEZ, ALEJANDRO

Provider ID: 284119
Board Certified Specialty: No
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1114277787
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER


Provider ID: 215743
Board Certified Specialty: No
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1760691950
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


NARAYAN, HARI

Provider ID: 239114

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


SAH, SERENA

Provider ID: 215643

Board Certified Specialty: No



 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1295042653

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 215679

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)

D3. 專業提供者目錄

600-1640
Provider Gender: Male
NPI: 1417222472
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 215678
Board Certified Specialty: No
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1831423250
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE

Provider ID: N/A
Board Certified Specialty: No
 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124
 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1366622078

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE

Provider ID: 216969
Board Certified Specialty: No
 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
 Phone: (951) 696-6124




Fax: (951) 696-6293
 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1750513644
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin
Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297173
Board Certified Specialty: No
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (858) 966-7800
Fax: (858) 966-8231
 After Hours Phone: (858)
966-7800
Provider Gender: Male
NPI: 1942223664
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


INDRA, SEAN

Provider ID: 302626

Board Certified Specialty: No

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562


 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1427349091

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


KINGDON, JOANNA

Provider ID: 302318

Board Certified Specialty: No

 25170 HANCOCK AVE STE 150

MURRIETA, CA 92562


 Phone: (858) 966-7800

Fax: (858) 966-8231

 After Hours Phone: (858) 966-7800

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


MESIWALA, ADNAN

Provider ID: 275655

Board Certified Specialty: No

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

 Phone: (951) 696-6161

Fax: (951) 696-6105

 After Hours Phone: (951) 696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


MILLS, DAVID

Provider ID: 302147

Board Certified Specialty: No

 25500 MEDICAL CENTER DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

D3. 專業提供者目錄

OZCAN, ALI

Provider ID: 287924

Board Certified Specialty: No

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1265867683

Provider English Spoken: Y

Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302353

Board Certified Specialty: No

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1710418744

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216972

Board Certified Specialty: No

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6161

After Hours Phone: (951)
696-6161

Provider Gender: Female

NPI: 1740468057

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE

Provider ID: 243831

Board Certified Specialty: No

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6124

After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1073951828

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA

Provider ID: 248172

Board Certified Specialty: No

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951)
696-6124

D3. 專業提供者目錄

Provider Gender: Female

NPI: 1336503234


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301634

Board Certified Specialty: Yes

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1851540199

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S


HOSPITAL OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


SYED-UDDIN, SUMIYAH

Provider ID: 297771


Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562


 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1225606478

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


TANG, ANDREW

Provider ID: 294678


Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1184071516

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


TRAN, THERESA

Provider ID: 301835


Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124


Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1417496985

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE RANCHO


SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302819

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1841721172

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301640

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562


 Phone: (951) 600-1640


Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294382

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

RAO, APARNA


Provider ID: 215528

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

LOPEZ, XIMENA

Provider ID: 302857

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1

D3. 專業提供者目錄

MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
📞 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1740316405
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

NGO, MAI

Provider ID: 302112
Board Certified Specialty: No
📍 25170 HANCOCK AVE STE 1 MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
📞 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1508910787
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, RADY CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

PATTERSON, MARY

Provider ID: 215677
Board Certified Specialty: No
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
📞 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1912112020
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

VARGAS TRUJILLO, MARCELA

Provider ID: 215602
Board Certified Specialty: No

📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
📞 After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1952534091
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


ALGRA, JEFFREY


Provider ID: 215644
Board Certified Specialty: No
📍 25170 HANCOCK AVE MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760
📞 After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1457664518
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN

Provider ID: 283113


Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640


Provider Gender: Female
NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


DALAL, PRITHA

Provider ID: 215665


Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640


Provider Gender: Female
NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662


Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760


 After Hours Phone: (951)
600-1640


Provider Gender: Male
NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 283086


Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640


Provider Gender: Female
NPI: 1336356203


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

D3. 專業提供者目錄

Provider ID: 215522
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT **ANWAR, YASMIN**

Provider ID: 300845
Board Certified Specialty: Yes
25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Phone: (951) 304-7546
Fax: (951) 696-5872
After Hours Phone: (951)
304-7546
Provider Gender: Female
NPI: 1588602247
Provider English Spoken: Y
Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT **KIVIAT, ANNETTE**

Provider ID: 302453
Board Certified Specialty: No
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PULMONARY DISEASES **KUMAR, AVNEE**


Provider ID: 300014
Board Certified Specialty: No
25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1750745394
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A


PULMONARY DISEASES **SURI, RAJAT**

Provider ID: 283350
Board Certified Specialty: No
25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Phone: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951)
677-1111
Provider Gender: Male
NPI: 1144615337
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY GENERAL


FAIRBANKS, TIMOTHY

Provider ID: 246979

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

Provider Gender: Male

NPI: 1407010556

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY GENERAL


KLING, KAREN

Provider ID: 215583

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

Provider Gender: Female

NPI: 1982775144

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND*

*NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY GENERAL


VASCULAR


HOWE, STEVEN

Provider ID: 206761

Board Certified Specialty: No

 28062 BAXTER RD
MURRIETA, CA 92563

 *Phone: (877) 558-6248*

 *After Hours Phone: (877)
558-6248*

Provider Gender: Male

NPI: 1497702740

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY ORTHOPEDIC

CHENG, YU TSUN

Provider ID: 301902

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

Fax: (951) 600-1760

 *After Hours Phone: (951)
600-1640*

Provider Gender: Male

NPI: 1992982854

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST*

*HEALTHCARE RANCHO
SPRINGS HOSPITAL*

Medi-Cal Open Panel: Yes



Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR


Provider ID: 283160
Board Certified Specialty: No
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420
Board Certified Specialty: No
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1598979593

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


GRAMINS, DANIEL

Provider ID: 210049
Board Certified Specialty: No
 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1164495750

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC

HOWE, STEVEN


Provider ID: 210169
Board Certified Specialty: No
 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1497702740

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS

Provider ID: 210577
Board Certified Specialty: No
 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1871752956


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NATIONAL CITY


CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, ISIS

Provider ID: 302115

Board Certified Specialty: No

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945

Fax: (619) 475-5048

 After Hours Phone: (619)
470-1945

Provider Gender: Female


NPI: 1770124927


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

DE CASTRO, SHARLENE


Provider ID: 299158

Board Certified Specialty: No

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 339-5657

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1750019824


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301775

Board Certified Specialty: No

 330 E 8TH ST
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301774

Board Certified Specialty: No

 340 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE

PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422

Board Certified Specialty: No

📍 1428 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 434-1613

📞 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1801557947

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 294308

Board Certified Specialty: No

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 474-3919

📞 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1093130395

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303830

Board Certified Specialty: No

📍 2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 477-1286

📞 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303827

Board Certified Specialty: No

📍 2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 477-2628

📞 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

NOVENO, HILARIO

Provider ID: 297836

Board Certified Specialty: No

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

📞 After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1124486865

☑ Provider English Spoken: Y

D3. 專業提供者目錄

 *Provider Language(s)
Spoken: Tagalog*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-6:00PM*

 *Website: N/A*


CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291548

Board Certified Specialty: No

 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950


 *Phone: (844) 200-2426*

Fax: (619) 399-5959

 *After Hours Phone: (844)
200-2426*

Provider Gender: Male

NPI: 1821463159

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


FAMILY PRACTICE

DILLON, MAYRA


Provider ID: 305287

Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950


 *Phone: (619) 662-4100*

Fax: (619) 336-2323

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1629232715

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


*MERCY HOSPITAL CHULA
VISTA*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 301784

Board Certified Specialty: No

 2400 E 8TH ST
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*


Fax: (619) 259-2807

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1952563421

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 301278

Board Certified Specialty: No

 1136 D AVE
NATIONAL CITY, CA 91950

 *Phone: (619) 662-4100*

Fax: (619) 474-3722

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1023278314

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:30AM-5:30PM*

SA 8:00AM-2:30PM

D3. 專業提供者目錄

 Website: N/A


INTERVENTIONAL **CARDIOLOGY**

CAMACHO, BENJAMIN

Provider ID: 35045

Board Certified Specialty: No

 1615 SWEETWATER RD
NATIONAL CITY, CA 91950


 Phone: (619) 474-2233

Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes


Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET


INTERVENTIONAL **CARDIOLOGY**

CAMACHO, BENJAMIN

Provider ID: 269129

Board Certified Specialty: No

 1615 SWEETWATER RD
NATIONAL CITY, CA 91950


 Phone: (619) 474-2233


Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL **CARDIOLOGY**


CAMACHO, BENJAMIN

Provider ID: 290137

Board Certified Specialty: No

 1615 SWEETWATER RD STE
D

NATIONAL CITY, CA 91950


 Phone: (619) 474-2233


Fax: (619) 474-2211

 After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


INTERVENTIONAL **CARDIOLOGY**

DAMANI, SAMIR

Provider ID: 303098

Board Certified Specialty: No

 655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

 Phone: (858) 800-2480

Fax: (858) 216-1908

 After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

D3. 專業提供者目錄

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No

 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

 Phone: (619) 512-1915

Fax: (619) 512-1913

 After Hours Phone: (619)
512-1915

Provider Gender: Male

NPI: 1407997406

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

ROUGH, STEVEN

Provider ID: 301320

Board Certified Specialty: No

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,

ALVARADO HOSP MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302044

Board Certified Specialty: No

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302043

Board Certified Specialty: No

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,

ALVARADO HOSP MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

NEPHROLOGY

COMUNALE, RODERICK

Provider ID: 290784

Board Certified Specialty: No

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Phone: (858) 551-0276

Fax: (858) 454-8796

After Hours Phone: (858)
551-0276

Provider Gender: Male

NPI: 1568462109

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE
VALLEY HOSPITAL,

ALVARADO HOSPITAL LLC,
SCRIPPS MERCY HOSPITAL,
ALVARADO HOSP MED CTR,
KINDRED HOSPITAL SAN
DIEGO, KINDRED HOSPITAL
SAN DIEGO, SELECT
SPECIALTY HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 301797

Board Certified Specialty: No

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

Provider English Spoken: Y

Provider Language(s)
Spoken: Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee
Global Medical Center,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 269247

Board Certified Specialty: No

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

pquiroz_80@hotmail.com


OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 206092

Board Certified Specialty: No

 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950


 Phone: (619) 475-1261


Fax: (619) 475-1267

 After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

pquiroz_80@hotmail.com


OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 302451

Board Certified Specialty: No

 2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

HIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268722

Board Certified Specialty: No

 2240 E PLAZA BLVD STE
F-G

NATIONAL CITY, CA 91950

 Phone: (800) 898-2020


Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

OPTOMETRIST

KOO, ANITA

Provider ID: 304538

Board Certified Specialty: No

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

ATMAR, AKMAL

Provider ID: 269784

Board Certified Specialty: No

2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950

Phone: (929) 287-4511

Fax: (877) 671-6835

After Hours Phone: (929)
287-4511

Provider Gender: Male

NPI: 1558656637

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Urdu

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PODIATRIST

DAVIDSON, JOHN

Provider ID: 129542

Board Certified Specialty: No

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)
427-3481

Provider Gender: Male

NPI: 1689069874

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-4:30PM

Website: N/A

PULMONARY DISEASES

LIM, ROSEMARIE

Provider ID: 262224

Board Certified Specialty: No

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

Phone: (619) 472-4900

Fax: (619) 479-9468

After Hours Phone: (619)
472-4900

Provider Gender: Female

NPI: 1841303419

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

SHARP CORONADO HOSP

AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

REGISTERED PHYSICAL THERAPIST




CHENG, BRANDON

Provider ID: 304531


Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

D3. 專業提供者目錄

 Phone: (619) 482-3000
 Fax: (619) 695-0050
 After Hours Phone: (619) 482-3000



Provider Gender: Male
NPI: 1336894724

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST



JIMENEZ, ANDREA

Provider ID: 299888
Board Certified Specialty: No
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000

Provider Gender: Female
NPI: 1407440670




 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER

 Hours: M-F 7:00AM-7:00PM
 Website: N/A


REGISTERED PHYSICAL THERAPIST




KARANDE, PRACHI

Provider ID: 287102
Board Certified Specialty: No
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 482-3001

 After Hours Phone: (619) 482-3000




Provider Gender: Female
NPI: 1699357525

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
7:00AM-6:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305011
Board Certified Specialty: No
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 695-0050


 After Hours Phone: (619) 482-3000

Provider Gender: Female
NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305012
Board Certified Specialty: No
 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
 Phone: (619) 482-3000
 Fax: (619) 695-0050


 After Hours Phone: (619) 482-3000

Provider Gender: Female
NPI: 1457136269

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

D3. 專業提供者目錄

Provider ID: 301996

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286784

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301110

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298366

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301430

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

D3. 專業提供者目錄

VILLANUEVA, GIOVANNI

Provider ID: 301533

Board Certified Specialty: No

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299882

Board Certified Specialty: No

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BAE, JINYI

Provider ID: 298197

Board Certified Specialty: No

619 CROUCH ST STE 100
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1871154526

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\64

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BALDWIN, ANDREA

Provider ID: 294937

Board Certified Specialty: No

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497202121

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 303861

Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CARLSON, KATHLEEN

Provider ID: 300217

Board Certified Specialty: No

 2210 MESA DR STE 300

OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 566-1501

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1629180161

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CHILAKA, SAMUEL

Provider ID: 301315

Board Certified Specialty: No

 517 N HORNE ST

OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CHILAKA, SAMUEL

Provider ID: 301314

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CHILAKA, SAMUEL

Provider ID: 301313

Board Certified Specialty: No

 818 PIER VIEW WAY

OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CHIRIBOGA, MEGAN ELISE

Provider ID: 295492

Board Certified Specialty: No

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

D3. 專業提供者目錄

☎ After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1942931589

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHOI, JI

Provider ID: 299765

Board Certified Specialty: No

📍 3220 MISSION AVE STE 1
OCEANSIDE, CA 92058

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

☎ After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1891207668

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Korean

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHOI, JI

Provider ID: 299766

Board Certified Specialty: No

📍 605 CROUCH ST STE C
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

☎ After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1891207668

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Korean

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CISZEK, ALEXANDRA

Provider ID: 306002

Board Certified Specialty: No

D3. 專業提供者目錄

 605 CROUCH ST
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578220612

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY

Provider ID: 301304

Board Certified Specialty: No

 2210 MESA DR STE 5
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302289

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302290

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221


 Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 268660

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

D3. 專業提供者目錄

HERNANDEZ, JESSICA

Provider ID: 304495

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302298

Board Certified Specialty: No

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302300

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494

Board Certified Specialty: No

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302299

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

D3. 專業提供者目錄

Provider ID: 298084

Board Certified Specialty: No

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298081

Board Certified Specialty: No

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298082

Board Certified Specialty: No

818 PIER VIEW WAY

OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295287

Board Certified Specialty: No

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295286

Board Certified Specialty: No

818 PIER VIEW WAY

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1790978617

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

D3. 專業提供者目錄

W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295285

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1689027542

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

RONCAROLO DE VRIES, ROXANE

Provider ID: 298765

Board Certified Specialty: No

 2210 MESA DR STE 5
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Male


NPI: 1497402184

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619488731


 Provider English Spoken: Y

D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM
SA 9:00AM-4:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

SHAHBAZ, LINNAE

Provider ID: 304822

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Female

NPI: 1427712215


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: TU-W*
0:00PM-8:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

SHAHBAZ, LINNAE

Provider ID: 304821

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Female

NPI: 1427712215


 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: TU-W*
0:00PM-8:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295505

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Male

NPI: 1851747166

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

PROVIDER

 *Hours: M-F*
8:00AM-2:00PM

SA 9:00AM-4:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295503

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Male

NPI: 1851747166


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-2:00PM

SA 9:00AM-4:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295506

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*

D3. 專業提供者目錄

631-5000

Provider Gender: Male


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303725

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1679926208


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303723

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1679926208


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303841

Board Certified Specialty: No

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1679926208


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303722

Board Certified Specialty: No

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1679926208


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No

 2210 MESA DR STE 5

D3. 專業提供者目錄

OCEANSIDE, CA 92054
☎ Phone: (760) 757-5841
Fax: (760) 736-8740
🕒 After Hours Phone: (760) 757-5841
Provider Gender: Female
NPI: 1801134275
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733
Board Certified Specialty: No
📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
☎ Phone: (760) 757-5841
Fax: (760) 736-8740
🕒 After Hours Phone: (760) 757-5841
Provider Gender: Female
NPI: 1730274374
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

SCHROEDER, MARY

Provider ID: 290688
Board Certified Specialty: No
📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
☎ Phone: (760) 757-5841
Fax: (760) 736-8740
🕒 After Hours Phone: (760) 757-5841
Provider Gender: Female
NPI: 1164431664

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542
Board Certified Specialty: No
📍 619 CROUCH ST
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)

736-6767
Provider Gender: Male
NPI: 1750791745
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290221
Board Certified Specialty: No
📍 517 N HORNE ST
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1972883882
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934
Board Certified Specialty: No

D3. 專業提供者目錄

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1811423072

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298005

Board Certified Specialty: No

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629509260

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298004

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (766) 315-0000

Fax: (760) 414-3892

After Hours Phone: (766)
315-0000

Provider Gender: Female

NPI: 1629509260

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298006

Board Certified Specialty: No

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629509260

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 305348

Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1891069662

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 305349
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 305350
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1891069662

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

FAMILY PRACTICE

SALAMANCA, OMAR

Provider ID: 295469
Board Certified Specialty: No
605 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male
NPI: 1083000947

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293352
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1871791749

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293350
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (844) 308-5003
Fax: (760) 414-3763

After Hours Phone: (844)
308-5003

Provider Gender: Female
NPI: 1871791749


Provider English Spoken: Y
Provider Language(s)

D3. 專業提供者目錄

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293353

Board Certified Specialty: No

 *4700 N RIVER RD*
OCEANSIDE, CA 92057


 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Female

NPI: 1871791749

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

MELBER, DORA

Provider ID: 296991

Board Certified Specialty: No

 *3605 VISTA WAY STE 172*
OCEANSIDE, CA 92056


 *Phone: (858) 966-6710*


Fax: (858) 966-6711

 *After Hours Phone: (858)*
966-6710

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

REIMERS, REBECCA

Provider ID: 294651

Board Certified Specialty: No

 *3605 VISTA WAY STE 172*
OCEANSIDE, CA 92056


 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858)*
966-6710

Provider Gender: Female

NPI: 1801207634

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL


MEDICINE

RICHARDSON, ALVIE

Provider ID: 264686

Board Certified Specialty: No

 *3605 VISTA WAY STE 172*
OCEANSIDE, CA 92056

 *Phone: (858) 966-6710*

Fax: (858) 966-6711

 *After Hours Phone: (858)*
966-6710

Provider Gender: Male

NPI: 1154305977

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

D3. 專業提供者目錄

8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp

Grossmont Hospital, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 255793

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


WILLIAMS, KRISTIN

Provider ID: 206230

Board Certified Specialty: No

 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992847131


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

LIU, ANDREW

Provider ID: 301573

Board Certified Specialty: No

 3300 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (760) 967-9900

Fax: (760) 967-6769

 After Hours Phone: (760)

D3. 專業提供者目錄

967-9900
Provider Gender: Male
NPI: 1710481866
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443
Board Certified Specialty: No
 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
 Phone: (760) 967-9900
Fax: (760) 967-6769
 After Hours Phone: (760)
967-9900
Provider Gender: Male
NPI: 1710481866
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEUROLOGY

JINDAL, ANUJA

Provider ID: 206266
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1194046581
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206075
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1275604035
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273226
Board Certified Specialty: No
 4002 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1174758031
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (960) 547-1020
Fax: (760) 547-1021
After Hours Phone: (960)
547-1020

Provider Gender: Female
NPI: 1871664631
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297013
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020

Provider Gender: Female
NPI: 1699216010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302868
Board Certified Specialty: Yes
3231 WARING CT STE S
OCEANSIDE, CA 92056
Phone: (760) 631-6144
Fax: (760) 724-3920
After Hours Phone: (760)
631-6144

Provider Gender: Male
NPI: 1760845184
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

D3. 專業提供者目錄

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216416

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205887

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305308

Board Certified Specialty: No

3637 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 758-2008

Fax: (760) 758-2004

After Hours Phone: (760)
758-2008

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-TU

8:30AM-4:00PM

W-F 8:30AM-1:00PM

Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302871

Board Certified Specialty: No

3231 WARING CT STE S
OCEANSIDE, CA 92056

Phone: (760) 631-6144

Fax: (760) 724-3920

After Hours Phone: (760)
631-6144

Provider Gender: Male



NPI: 1437689536



D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

GEE, JENNIFER


Provider ID: 290210
Board Certified Specialty: No
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (951) 252-2720
Fax: (760) 414-3892
 After Hours Phone: (951)
252-2720
Provider Gender: Female
NPI: 1336589332
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290927
Board Certified Specialty: No
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Website: N/A




OPTOMETRIST

KIM, MICHAEL

Provider ID: 290902
Board Certified Specialty: No
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male








NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290904
Board Certified Specialty: No
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1164546313
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290237
Board Certified Specialty: No
 517 N HORNE ST

D3. 專業提供者目錄

OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1376958389
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290929
Board Certified Specialty: No
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1376958389
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OPTOMETRIST

RING, ROBERT

Provider ID: 269380
Board Certified Specialty: No
📍 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
☎ Phone: (760) 726-9383
Fax: (760) 726-9897
🕒 After Hours Phone: (760) 726-9383
Provider Gender: Male
NPI: 1336228840
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 10:00AM-7:00PM
TU-TH 9:00AM-5:00PM
F 9:00AM-0:00PM
🌐 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290318
Board Certified Specialty: No
📍 517 N HORNE ST
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236
☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290317
Board Certified Specialty: No
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732
Board Certified Specialty: No
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892

D3. 專業提供者目錄

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304887

Board Certified Specialty: No

📍 4700 N RIVER RD

OCEANSIDE, CA 92057

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303730

Board Certified Specialty: No

📍 818 PIER VIEW WAY

OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731

Board Certified Specialty: No

📍 517 N HORNE ST

OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304886

Board Certified Specialty: No

📍 517 N HORNE ST

OCEANSIDE, CA 92054

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿️ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086

Board Certified Specialty: No

📍 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

📞 Phone: (760) 547-1020

Fax: (760) 547-1021

📞 After Hours Phone: (760) 547-1020




Provider Gender: Female

NPI: 1760707657

🗣️ Provider English Spoken: Y








Cultural Competency: N

D3. 專業提供者目錄

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244899
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1952740177
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY





LEUIN, SHELBY




Provider ID: 206111
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1124230909
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297036
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Male
NPI: 1508250747
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA

Provider ID: 303781
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1000
Provider Gender: Female
NPI: 1851927883
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

D3. 專業提供者目錄

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205603

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1700926698

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 245755

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1285014498

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296537

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275786

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000

Fax: (760) 547-1021

After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1316162324

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297175

Board Certified Specialty: No

D3. 專業提供者目錄

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1942223664


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

JOSHI, WEENA

Provider ID: 262236

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1376862177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

KINGDON, JOANNA

Provider ID: 302319

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

LOVEJOY, AMY

Provider ID: 206109

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1790856557

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

PARK, RONALD

Provider ID: 295456

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000



Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000


Provider Gender: Male


NPI: 1881695914


D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 205787

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206951

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301251

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Male

NPI: 1215564265

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

SANACORA, RACHEL

Provider ID: 297730

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000


Fax: (760) 547-1021




 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1548987985

D3. 專業提供者目錄


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302801
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1000
Provider Gender: Female
NPI: 1407299787


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205813
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1000
Provider Gender: Female
NPI: 1083840920



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 296485
Board Certified Specialty: No
 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056
 Phone: (760) 547-1000
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1000
Provider Gender: Female
NPI: 1619359718


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

WANG, EMILY

Provider ID: 265953
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1427142363

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL


D3. 專業提供者目錄


HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301642

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1020


Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA


Provider ID: 294643

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /


REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852

Board Certified Specialty: No

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)

607-5350

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /


REHABILITATION

RYAN, KYLE


Provider ID: 275661

Board Certified Specialty: No

 3605 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1447645742

 Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT


BASIN, NATALIE

Provider ID: 304442
Board Certified Specialty: No
 3629 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 757-7546
Fax: (760) 547-2311
 After Hours Phone: (760)
757-7546
Provider Gender: Female
NPI: 1477196897

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT

BASIN, NATALIE

Provider ID: 302864
Board Certified Specialty: No
 3629 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 757-7546
Fax: (760) 547-2311
 After Hours Phone: (760)
757-7546


Provider Gender: Female
NPI: 1477196897

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302455
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021


 After Hours Phone: (760)
547-1020


Provider Gender: Female
NPI: 1205381845

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PHYSICIANS ASSISTANT


RAMOS, ELENA


Provider ID: 301307
Board Certified Specialty: No
 605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1306489570

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 305530
Board Certified Specialty: No
 3231 WARING CT STE K
OCEANSIDE, CA 92056
 Phone: (760) 607-5350
Fax: (760) 607-5365
 After Hours Phone: (760)
607-5350

D3. 專業提供者目錄

Provider Gender: Male
NPI: 1629674858
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

COOK, SHERYL

Provider ID: 304924
Board Certified Specialty: No
📍 619 CROUCH ST STE 100
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1750420816
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM
🌐 Website: N/A

PSYCHOLOGIST

JENSEN, BRIAN

Provider ID: 290775
Board Certified Specialty: No
📍 619 CROUCH ST

OCEANSIDE, CA 92054
☎ Phone: (760) 566-1620
Fax: (760) 433-4040
🕒 After Hours Phone: (760)
566-1620
Provider Gender: Male
NPI: 1518138049
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

KRAPES, MICHAEL

Provider ID: 290097
Board Certified Specialty: No
📍 2210 MESA DR STE 300
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 566-1501
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1215233028
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

MAUHILI, KENNA

Provider ID: 298272



Board Certified Specialty: No
📍 619 CROUCH ST STE 100
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-8740
🕒 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1386949360
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY


Provider ID: 295874
Board Certified Specialty: No
📍 3231 WARING CT STE K
OCEANSIDE, CA 92056
☎ Phone: (760) 607-5350
Fax: (760) 607-5365
🕒 After Hours Phone: (760)
607-5350
Provider Gender: Male
NPI: 1124577952
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A



SURGERY COLON SURGERY **NASSERY, KRISTEN**

Provider ID: 300122
Board Certified Specialty: No
 3601 VISTA WAY STE 203
OCEANSIDE, CA 92056
 Phone: (760) 724-5352
Fax: (760) 724-5447
 After Hours Phone: (760)
724-5352
Provider Gender: Female
NPI: 1396059440

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:30PM
 Website: N/A

SURGERY ORTHOPEDIC **CIDAMBI, EMILY**

Provider ID: 246469
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6789
Fax: (858) 966-8519


 After Hours Phone: (858)
966-6789

Provider Gender: Female
NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC **PRUSS, ERIKA**


Provider ID: 303798
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1538402441

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY ORTHOPEDIC **UPASANI, VIDYADHAR**

Provider ID: 260954
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020


Provider Gender: Male
NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC **FAIRBANKS, TIMOTHY**

Provider ID: 205498
Board Certified Specialty: No
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male
NPI: 1407010556


 Provider English Spoken: Y
Cultural Competency: N


D3. 專業提供者目錄

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206129

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY THORACIC

GRAMINS, DANIEL

Provider ID: 210048

Board Certified Specialty: No

 3998 VISTA WAY STE A
OCEANSIDE, CA 92056

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164495750

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PERRIS

CERTIFIED NURSE


PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No

 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571

 Phone: (760) 736-7676

Fax: (760) 566-1501

 After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM

 Website: N/A

POWAY

CARDIOVASCULAR DISEASE


ZAKOV, KAMEN

Provider ID: 122539

Board Certified Specialty: Yes

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 675-3110

Fax: (858) 613-2937

 After Hours Phone: (858)
675-3110

Provider Gender: Male

NPI: 1518933613

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

D3. 專業提供者目錄


Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

Provider Gender: Female

NPI: 1295049229

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER


WOLFE, AMANDA

Provider ID: 243582

Board Certified Specialty: No

 15525 POMERADO RD STE
B1
POWAY, CA 92064

 Phone: (858) 457-8333

 After Hours Phone: (858)
457-8333

Provider Gender: Female

NPI: 1063813475

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No

 15611 POMERADO RD STE
400
POWAY, CA 92064


 Phone: (858) 675-3200

Fax: (858) 673-1587

 After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1811400708

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


FLINN, SCOTT

Provider ID: 270054

Board Certified Specialty: No

 15611 POMERADO RD STE
400

POWAY, CA 92064


 Phone: (858) 675-3100

Fax: (858) 613-2938

 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1184694598


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A




FAMILY PRACTICE

NAJAND, SADAF


Provider ID: 270055

Board Certified Specialty: No


D3. 專業提供者目錄


 15611 POMERADO RD STE
400
POWAY, CA 92064
 Phone: (858) 675-3200
Fax: (858) 613-2938
 After Hours Phone: (858)
675-3200

Provider Gender: Female
NPI: 1669769717

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

WHITE, KERI

Provider ID: 269491



Board Certified Specialty: No

 15611 POMERADO RD STE
400
POWAY, CA 92064

 Phone: (858) 675-3200
Fax: (858) 613-2938

 After Hours Phone: (858)
675-3200


Provider Gender: Female
NPI: 1295701159


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 269315


Board Certified Specialty: No

 15611 POMERADO RD STE
400
POWAY, CA 92064

 Phone: (858) 675-3100
Fax: (858) 613-2937

 After Hours Phone: (858)
675-3100

Provider Gender: Male
NPI: 1134357007


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR

HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

MANSOUR, DAVID

Provider ID: 291544

Board Certified Specialty: No

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000


Provider Gender: Male
NPI: 1689164949

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 270016



Board Certified Specialty: No

 15611 POMERADO RD STE
575
POWAY, CA 92064

 Phone: (760) 489-1458
Fax: (760) 489-1246

 After Hours Phone: (760)
489-1458

Provider Gender: Male
NPI: 1295795037

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Punjabi

Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No

 15611 POMERADO RD STE 400

POWAY, CA 92064


 *Phone: (858) 675-3110*

Fax: (858) 675-3110

 *After Hours Phone: (858) 675-3110*

Provider Gender: Male

NPI: 1356344196

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi*

Cultural Competency: N


Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-5:00PM*

 *Website: N/A*

INTERVENTIONAL

CARDIOLOGY


SERRY, ROD

Provider ID: 269471

Board Certified Specialty: No

 15611 POMERADO RD STE 400

POWAY, CA 92064


 *Phone: (858) 592-2696*


Fax: (760) 743-8837

 *After Hours Phone: (858) 592-2696*

Provider Gender: Male

NPI: 1912945130

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Farsi, Portuguese,
Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP


*MEMORIAL HOSPITAL,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

NEONATAL / PERINATAL


MEDICINE

SAUER, CHARLES

Provider ID: 206164

Board Certified Specialty: No

 15615 POMERADO RD
POWAY, CA 92064

 *Phone: (858) 613-4143*

Fax: (858) 613-4539

 *After Hours Phone: (858) 613-4143*

Provider Gender: Male

NPI: 1538388988

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,*

*SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

NEONATAL / PERINATAL


MEDICINE

WEST, JULIE

Provider ID: 297072

Board Certified Specialty: No

 15615 POMERADO RD
POWAY, CA 92064

 *Phone: (858) 613-4143*

Fax: (858) 613-4539

 *After Hours Phone: (858) 613-4143*

Provider Gender: Female

NPI: 1811151848

 *Provider English Spoken: Y*


D3. 專業提供者目錄


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

COBB, DAMON

Provider ID: 206030

Board Certified Specialty: No

 15706 POMERADO RD STE
110
POWAY, CA 92064

 Phone: (858) 485-0130
Fax: (858) 485-9424

 After Hours Phone: (858)
485-0130

Provider Gender: Male

NPI: 1851435598

Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-1:00PM

 Website: N/A

OPHTHALMOLOGY


LOZIER, JEFFREY

Provider ID: 270187

Board Certified Specialty: Yes

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 675-3100
Fax: (858) 618-1523

 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1225004450

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OPTOMETRIST


KIM, MICHELLE

Provider ID: 270014

Board Certified Specialty: No

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 675-3140
Fax: (858) 613-2936

 After Hours Phone: (858)
675-3140

Provider Gender: Female

NPI: 1457328825

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


CHATFIELD, ALEXANDRA

Provider ID: 276715

Board Certified Specialty: No

 15611 POMERADO RD STE
525

POWAY, CA 92064

 Phone: (858) 485-0050
Fax: (858) 673-5187

 After Hours Phone: (858)
485-0050

Provider Gender: Female

NPI: 1215584628

Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


D3. 專業提供者目錄




 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PODIATRIST

HAN, KYOUNG

Provider ID: 296326
Board Certified Specialty: No
 15706 POMERADO RD STE
102
POWAY, CA 92064
 Phone: (858) 485-1494
Fax: (858) 485-1515
 After Hours Phone: (858)
485-1494
Provider Gender: Female
NPI: 1083954671

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
SADDLEBACK MEMORIAL
MED CTR, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A



PODIATRIST




READ, TRENTON

Provider ID: 296656
Board Certified Specialty: No
 15706 POMERADO RD STE
102
POWAY, CA 92064
 Phone: (858) 485-1494
Fax: (858) 485-1515

 After Hours Phone: (858)
485-1494

Provider Gender: Male
NPI: 1952963431


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A



PSYCHOLOGIST

VALLEZ-BARLAM, ANDREA

Provider ID: 290629
Board Certified Specialty: No
 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (858) 633-4688

 After Hours Phone: (858)
218-3000
Provider Gender: Female
NPI: 1710902143

 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM

 Website: N/A




RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060
Board Certified Specialty: No
 15611 POMERADO RD STE
400
POWAY, CA 92064
 Phone: (858) 675-3150
Fax: (858) 924-1775

 After Hours Phone: (858)
675-3150
Provider Gender: Female
NPI: 1033388616

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Kannada,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402
Board Certified Specialty: No
 15725 POMERADO RD STE
117
POWAY, CA 92064
 Phone: (858) 312-1717
Fax: (858) 435-0207

D3. 專業提供者目錄

☎ After Hours Phone: (858) 312-1717

Provider Gender: Female

NPI: 1750534715

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Kannada,
Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, PALOMAR

HEALTH, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS GREEN HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-4:00PM

🌐 Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 305851

Board Certified Specialty: No

📍 15611 POMERADO RD
POWAY, CA 92064

☎ Phone: (858) 675-3100

Fax: (858) 673-5187

☎ After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1912971334

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 257485

Board Certified Specialty: Yes

📍 15611 POMERADO RD STE
400

POWAY, CA 92064

☎ Phone: (858) 613-8900

Fax: (858) 618-1523

☎ After Hours Phone: (858)
613-8900

Provider Gender: Male

NPI: 1407803687

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F

8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552

Board Certified Specialty: Yes

📍 15611 POMERADO RD STE
400

POWAY, CA 92064

☎ Phone: (858) 613-8900

Fax: (858) 618-1523

☎ After Hours Phone: (858)
613-8900

Provider Gender: Male

NPI: 1407803687

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Armenian, Italian,
Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No

📍 15611 POMERADO RD STE
525

POWAY, CA 92064

D3. 專業提供者目錄

☎ Phone: (858) 485-0050
Fax: (858) 485-5071

📞 After Hours Phone: (858) 485-0050

Provider Gender: Male

NPI: 1891809257

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RAMONA

CERTIFIED NURSE

PRACTITIONER

SALAS, JESSICA

Provider ID: 269344

Board Certified Specialty: No

📍 211 13TH ST

RAMONA, CA 92065

☎ Phone: (760) 789-5160

Fax: (760) 788-7962

📞 After Hours Phone: (760) 789-5160

Provider Gender: Female

NPI: 1356817431

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

WELLS, TODD

Provider ID: 299118

Board Certified Specialty: No

📍 211 13TH ST

RAMONA, CA 92065

☎ Phone: (760) 789-5160

Fax: (760) 722-5292

📞 After Hours Phone: (760) 789-5160

Provider Gender: Male

NPI: 1952377806

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SAN DIEGO

ADOLESCENT MEDICINE

CHELVAKUMAR, GAYATHRI

Provider ID: 296674

Board Certified Specialty: No

📍 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-8493

Fax: (858) 966-8818

📞 After Hours Phone: (858) 966-8493

Provider Gender: Female

NPI: 1447473848

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE

Provider ID: 284917

Board Certified Specialty: No

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144589979

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ALLERGY IMMUNOLOGY


RIEDL, MARC

Provider ID: 255768

Board Certified Specialty: Yes

 8899 UNIVERSITY CENTER
LN STE 230
SAN DIEGO, CA 92122

 *Phone: (858) 657-5350*

 *After Hours Phone: (858)
657-5350*

Provider Gender: Male

NPI: 1285654889

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242303

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*

926-8273

Provider Gender: Male

NPI: 1811366644

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1265938724

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1891130993

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

ANESTHESIOLOGY


CANO, SARAH

Provider ID: 200959

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1750517306

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,*

D3. 專業提供者目錄

SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239002
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710373642
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735
Board Certified Specialty: Yes
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239607
Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1720473044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308
Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-5754
After Hours Phone: (619)
543-5754
Provider Gender: Female
NPI: 1417361981

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

NGUYEN, QUOC SY

Provider ID: 242188
Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1871911644
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239600
Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427315118
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255316

D3. 專業提供者目錄

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243294

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SREJIC, UNA

Provider ID: 206383

Board Certified Specialty: Yes

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588723860

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, UCSF Medical
Center At Mission Bay, UCSF
MEDICAL CENTER AT MOUNT
ZION, MEDICAL CTR AT UCSF,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286569

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246749

D3. 專業提供者目錄

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1699057885

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

TSUDA, PAIGE

Provider ID: 271682

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003261595

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283689

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1871912493

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284577

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801258264

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272804

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1629463104

🗨 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


YOUNAN, LAWRENCE

Provider ID: 240870

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243553

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103



Phone: (800) 926-8273



After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700296514

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299880

Board Certified Specialty: No

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300089

Board Certified Specialty: No

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CARDIOVASCULAR DISEASE

ALANI, ANAS

D3. 專業提供者目錄

Provider ID: 201252
Board Certified Specialty: Yes
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1154633709
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CENTER, ARROWHEAD REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR, RIVERSIDE COUNTY REGIONAL MED CTR, LAC RANCHO LOS AMIGOS NATIONAL REHAB CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **CASTELLANOS, LUIS**

Provider ID: 211764
Board Certified Specialty: No
330 LEWIS ST FL 3
SAN DIEGO, CA 92103
Phone: (858) 657-8530
Fax: (619) 543-2287
After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **CASTELLANOS, LUIS**

Provider ID: 211765
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CENTER, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE **LERNER, JONATHAN**

Provider ID: 303447
Board Certified Specialty: No
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1962899823
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 214020

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851561021

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

PHREANER, NICHOLAS

Provider ID: 239946

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

PROHASKA, THOMAS

Provider ID: 299912

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861889644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CARDIOVASCULAR DISEASE

YEANG, CALVIN

Provider ID: 238822

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 657-8530
After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1598011058

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304137

Board Certified Specialty: No

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 277967

Board Certified Specialty: No

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 277968

Board Certified Specialty: No

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST


ARELLANO, JACQUELINE

Provider ID: 277966

Board Certified Specialty: No

 330 LEWIS ST

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304138

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1659745610

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

D3. 專業提供者目錄

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304132

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277699

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304131

Board Certified Specialty: No

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

Provider English Spoken: Y

Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277700

Board Certified Specialty: No

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

D3. 專業提供者目錄

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295380
Board Certified Specialty: No
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
 Phone: (619) 325-1161
Fax: (619) 325-1717
 After Hours Phone: (619)
325-1161
Provider Gender: Male
NPI: 1649594979
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, French,
Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474
Board Certified Specialty: No
 9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 240-6470
 After Hours Phone: (844)
200-2426
Provider Gender: Female
NPI: 1396876959

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGUILA, YESENIA

Provider ID: 304624
Board Certified Specialty: No
 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 Phone: (619) 266-3332
Fax: (619) 266-6000
 After Hours Phone: (619)
266-3332

Provider Gender: Female
NPI: 1245966092

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ALBARRAN-SLOVIN, MELODY

Provider ID: 299328
Board Certified Specialty: No
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619)
429-3733
Provider Gender: Female
NPI: 1740953249
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE

PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013680982

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AMOS, MARIA

Provider ID: 291439

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235891953

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (858) 534-8019

🕒 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1699184259

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 302309

Board Certified Specialty: No

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 645-6405
Fax: (619) 687-1067

🕒 After Hours Phone: (619)
645-6405

Provider Gender: Female

NPI: 1871295493

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184027724

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY




THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO, Highland
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):




D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE



PRACTITIONER

BILOTTA, NATALIE

Provider ID: 291418
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1144809393

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Website: N/A




CERTIFIED NURSE

PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243718
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1851749253
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE



PRACTITIONER

BUI, ANH

Provider ID: 304272
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Male
NPI: 1184309684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



 Website: N/A




CERTIFIED NURSE

PRACTITIONER

BUI, ANH

Provider ID: 304273
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925


Provider Gender: Male
NPI: 1184309684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CAMARGO-LOWTHERS, ANGELICA

Provider ID: 54944
Board Certified Specialty: No
 8010 FROST ST STE 510
SAN DIEGO, CA 92123
 Phone: (858) 637-4700
Fax: (858) 637-4701
 After Hours Phone: (858)
637-4700

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1912982539

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 295914

Board Certified Specialty: No

 8010 FROST ST STE 220
SAN DIEGO, CA 92123


 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1912982539

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 270981

Board Certified Specialty: No

 8010 FROST ST STE 510
SAN DIEGO, CA 92123


 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1912982539

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CAPOZZI, JENNIFER

Provider ID: 241031

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHANTALA, ELIZABETH

Provider ID: 291305

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942430442

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357

D3. 專業提供者目錄

Board Certified Specialty: No

📍 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811543622

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184111684

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286368

Board Certified Specialty: No

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1104173558

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE

Provider ID: 304288

Board Certified Specialty: No

📍 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

☎ Phone: (619) 280-2058

Fax: (858) 633-4682

🕒 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1871365312

🗉 Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

CONNER, PAMELA

Provider ID: 299930

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279836

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279835

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


COSINO, ANJELICA

Provider ID: 201309

Board Certified Specialty: No

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295238749

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

DAVIES, SUMMER

Provider ID: 253692

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN STE 220

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

D3. 專業提供者目錄

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1679850671

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (619) 471-9250

Fax: (619) 471-9275

☎ After Hours Phone: (619)
471-9250

Provider Gender: Female

NPI: 1164616280

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH

Provider ID: 300051

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247981

Board Certified Specialty: No

📍 330 LEWIS ST
SAN DIEGO, CA 92103




D3. 專業提供者目錄

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740517127
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A







CERTIFIED NURSE
PRACTITIONER
DEUTSCH, KAREN

Provider ID: 247980
Board Certified Specialty: No
 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740517127
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL): Provider Gender: Female
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
DOAN, ANGELA








Provider ID: 291425
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639638968
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
DOAN, ANGELA

Provider ID: 291426
Board Certified Specialty: No
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8372
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8372

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
DRISCOLL, KARRIE

Provider ID: 286345
Board Certified Specialty: No
 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396085098
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
DRISCOLL, SUSAN

D3. 專業提供者目錄

Provider ID: 298968
Board Certified Specialty: No
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
Fax: (619) 758-3384
After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1477755684

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN
Provider ID: 269863
Board Certified Specialty: No
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619)
297-4707
Provider Gender: Female
NPI: 1003260894
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

ECLARINO, GALELEO
Provider ID: 296764
Board Certified Specialty: No
9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844)
200-2426
Provider Gender: Female
NPI: 1518687748

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA
Provider ID: 278982
Board Certified Specialty: No
200 W ARBOR DR

SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1669442182
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

ERICKSON, LISA
Provider ID: 287444
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1669442182
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

FELD, KEREN

Provider ID: 297672

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1730835083

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


FISHER, SLOANE

Provider ID: 301585

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1538807003

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GARTH, MELISSA

Provider ID: 274053

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GIORGI, ASHLEY

Provider ID: 304877

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1952174203


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

D3. 專業提供者目錄

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299466

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299467

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


GUADARRAMA, IGNACIO

Provider ID: 262419

Board Certified Specialty: No

 995 GATEWAY CENTER
WAY STE 105

SAN DIEGO, CA 92102


 Phone: (619) 264-1934


Fax: (619) 264-1937

 After Hours Phone: (619)
264-1934

Provider Gender: Male

NPI: 1821331174

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HA, THU


Provider ID: 293260

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER



HA, THU

Provider ID: 293261

Board Certified Specialty: No


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

D3. 專業提供者目錄

 Phone: (858) 810-8700
 Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female
NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HARKNESS, RUMIKO

Provider ID: 208841

Board Certified Specialty: No


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487785093

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HAROUSH, GAL


Provider ID: 302475

Board Certified Specialty: No

 4973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

 Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1992461230

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HART, BECKY


Provider ID: 305337

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101


 Phone: (619) 233-8500

 Fax: (619) 687-1067

 After Hours Phone: (619) 233-8500

Provider Gender: Female

NPI: 1316626344

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


HEAD, KRISTIN


Provider ID: 268656

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

 Fax: (858) 966-4064

 After Hours Phone: (858) 966-7484

Provider Gender: Female

NPI: 1699078923

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

D3. 專業提供者目錄

Provider ID: 299144

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1710632435

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275254

Board Certified Specialty: No

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Phone: (858) 454-4300

Fax: (858) 454-5088

After Hours Phone: (858)
454-4300

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275255

Board Certified Specialty: No

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)
298-9809

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 295393

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

D3. 專業提供者目錄

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

IBARRA, MARTHA


Provider ID: 295392

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

INSTONE, SUSAN

Provider ID: 293255

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

INSTONE, SUSAN


Provider ID: 293254

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE

150

SAN DIEGO, CA 92105


 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1710223268

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

JONES, CHRISTA

Provider ID: 275563

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396371431

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KEMP, KATHRINE

Provider ID: 301276

Board Certified Specialty: No

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101


 Phone: (619) 645-6405

Fax: (619) 687-1067

 After Hours Phone: (619)
645-6405

Provider Gender: Female

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KI, TRISH


Provider ID: 293293

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KI, TRISH

Provider ID: 293294

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302427

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1780334110

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KIDANE, ZINNIA


Provider ID: 302426

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female


NPI: 1780334110


 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):  N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

KLEMENCIC, TAHNEE

Provider ID: 302628

Board Certified Specialty: No

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 *Phone: (858) 966-8974*
Fax: (858) 966-6721

 *After Hours Phone: (858)
966-8974*

Provider Gender: Female

NPI: 1134802283


 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE



PRACTITIONER

LAFORTEZA, JOZELLE

Provider ID: 202666

Board Certified Specialty: No

 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1538578307

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER


LANE, KIMBERLY

Provider ID: 301600

Board Certified Specialty: No

 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

 *Phone: (858) 430-1101*
Fax: (858) 221-5049

 *After Hours Phone: (858)
430-1101*

Provider Gender: Female

NPI: 1457670119


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):  N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No

 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

 *Phone: (858) 429-7646*
Fax: (858) 429-7929

 *After Hours Phone: (858)
429-7646*

Provider Gender: Female

NPI: 1457670119


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):  N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No

 11770 BERNARDO PLAZA

D3. 專業提供者目錄

CT STE 270
SAN DIEGO, CA 92128
☎ Phone: (858) 485-0554
Fax: (858) 429-7933
🕒 After Hours Phone: (858) 485-0554
Provider Gender: Female
NPI: 1457670119
🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY
Provider ID: 301603
Board Certified Specialty: No
📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
☎ Phone: (619) 297-4707
Fax: (858) 429-7927
🕒 After Hours Phone: (619) 297-4707
Provider Gender: Female
NPI: 1457670119
🗉 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F

8:00AM-5:00PM
🌐 Website: N/A
CERTIFIED NURSE PRACTITIONER
MANZO, CORINA
Provider ID: 304481
Board Certified Specialty: No
📍 2630 1ST AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 234-2158
Fax: (619) 234-0206
🕒 After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1669087326
🗉 Provider English Spoken: Y
🗉 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER
MARTINEZ, CAROLYN
Provider ID: 293345
Board Certified Specialty: No
📍 1016 OUTER RD
SAN DIEGO, CA 92154
☎ Phone: (619) 429-3733
Fax: (619) 628-5550
🕒 After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1609101997
🗉 Provider English Spoken: Y
🗉 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
MAROSOK, MICHELLE
Provider ID: 305311
Board Certified Specialty: No
📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
☎ Phone: (858) 649-5100
Fax: (858) 649-5099
🕒 After Hours Phone: (858) 649-5100

Provider Gender: Female
NPI: 1669166112
🗉 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18\199
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER
MARTINEZ, CAROLYN
Provider ID: 293345
Board Certified Specialty: No
📍 1016 OUTER RD
SAN DIEGO, CA 92154
☎ Phone: (619) 429-3733
Fax: (619) 628-5550
🕒 After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1609101997
🗉 Provider English Spoken: Y
🗉 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MEDINA, RUBELETA

Provider ID: 296673

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN RD STE B1011

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 240-6470

 After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1881153963


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MENDOZA, GRETTEL MARIE

Provider ID: 303202

Board Certified Specialty: No

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1245652387


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MICK, SHARON

Provider ID: 299647

Board Certified Specialty: No

 16950 VIA TAZON SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299648

Board Certified Specialty: No

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299649

Board Certified Specialty: No

 200 W ARBOR DR SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female



NPI: 1891061966

 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER
MIDORO, ABEGAILLE

Provider ID: 303829
Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
Fax: (858) 578-4417
 *After Hours Phone: (844)*
200-2426

Provider Gender: Female
NPI: 1952925851




 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TU*
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER
MIDORO, ABEGAILLE


Provider ID: 303828
Board Certified Specialty: No

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 *Phone: (844) 200-2426*
Fax: (858) 536-8034
 *After Hours Phone: (844)*
200-2426

Provider Gender: Female
NPI: 1952925851

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Tagalog

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TU*
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


 *Website: N/A*




CERTIFIED NURSE
PRACTITIONER
MILLER, EVA

Provider ID: 255833
Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103
 *Phone: (619) 471-9210*
 *After Hours Phone: (619)*
471-9210

Provider Gender: Female
NPI: 1043492523

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE
PRACTITIONER
MOHEBBI, ATHENA




Provider ID: 201325
Board Certified Specialty: No

 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1952627176

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

D3. 專業提供者目錄

PRACTITIONER

MORAN, TIFFANY

Provider ID: 304275

Board Certified Specialty: No

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1730730649

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291419

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184386864

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NEJATI, FRESHTA

Provider ID: 214112

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1831598119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291347

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291346

Board Certified Specialty: No

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291348

Board Certified Specialty: No

8899 UNIVERSITY CENTER

D3. 專業提供者目錄

LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336896232
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO
Provider ID: 286911
Board Certified Specialty: No
📍 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124486865
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO
Provider ID: 286912
Board Certified Specialty: No
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124486865

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

O'CONNELL, STEFANY
Provider ID: 296846
Board Certified Specialty: No
📍 1016 OUTER RD
SAN DIEGO, CA 92154
☎ Phone: (619) 429-3733
Fax: (619) 628-5550
📞 After Hours Phone: (619) 429-3733

Provider Gender: Female
NPI: 1386378479
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH
Provider ID: 296716
Board Certified Specialty: No
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1073278180
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM

D3. 專業提供者目錄

 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

OREJEL, EDITH

Provider ID: 296715

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1073278180

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ORPILLA, IMELDA

Provider ID: 282962

Board Certified Specialty: No

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1790785988

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 8:30AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


ORPILLA, IMELDA

Provider ID: 243506

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129


 Phone: (214) 590-5306


Fax: (858) 240-6470

 After Hours Phone: (214)
590-5306

Provider Gender: Female

NPI: 1790785988

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


PAI, SARAH

Provider ID: 276870

Board Certified Specialty: No

 350 DICKINSON ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255762167

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248

Board Certified Specialty: No

 6973 LINDA VISTA RD

D3. 專業提供者目錄

SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
☎ Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925

Provider Gender: Male

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249

Board Certified Specialty: No

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

☎ Fax: (858) 633-4680

📞 After Hours Phone: (858) 810-8700

Provider Gender: Male

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286223

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497358915

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286222

Board Certified Specialty: No

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497358915

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1497358915

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER

PETTIS, BETH

Provider ID: 286878

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326638958

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


RAJAEI, NILOUFAR

Provider ID: 291437

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1275904047

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


RANDLE, CARRIE

Provider ID: 299296

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1558557348

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


RIEGO, SUZANNE

Provider ID: 214477

Board Certified Specialty: No

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (858) 292-7200

 After Hours Phone: (858)
292-7200

Provider Gender: Female

NPI: 1144453754


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

ROBERTSON, RACHAEL

Provider ID: 286940

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female

NPI: 1659912327


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


RODENMEYER, EVE

Provider ID: 295956

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female


NPI: 1225782022


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ROSCOE, SYDNEY


Provider ID: 305039

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ROSCOE, SYDNEY


Provider ID: 305038

Board Certified Specialty: No

 350 DICKINSON ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ROSCOE, SYDNEY


Provider ID: 305037

Board Certified Specialty: No

 4510 EXECUTIVE DR

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992448864

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


ROSS, CRYSTAL

Provider ID: 287763

Board Certified Specialty: No

 350 DICKINSON ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

D3. 專業提供者目錄


JOHN SALLY THORNTON,
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649934126


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1528787132


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111



 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1285732586

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SABIN, NANCY

Provider ID: 293287

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1285732586

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 303282

Board Certified Specialty: No

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1619594124


 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SANTANGELO, JOANNE


Provider ID: 293285

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1619370475

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1619370475

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293258

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 293259

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851

Board Certified Specialty: No

 350 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1215394382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

SELBY, BLAKE

Provider ID: 246423

Board Certified Specialty: No

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417194358

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


SELBY, BLAKE

Provider ID: 256646

Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417194358

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER


SENA, TIFFANY

Provider ID: 300229

Board Certified Specialty: No

 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

 Phone: (619) 297-5437

Fax: (619) 297-4567

 After Hours Phone: (619)
297-5437

Provider Gender: Female

NPI: 1710539523

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE

PRACTITIONER

SWARTZ, ERIN

Provider ID: 255787

Board Certified Specialty: No

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (858) 657-8530

📞 After Hours Phone: (858)
657-8530

Provider Gender: Female

NPI: 1639571292

🗒 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TAING, JENNIFER

Provider ID: 201573

Board Certified Specialty: No

📍 4168 FRONT ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649528357

🗒 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TALBOT, ADRIANNE

Provider ID: 278183

Board Certified Specialty: No

📍 4168 FRONT ST STE 1A
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1992048557

🗒 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TIMBERMAN, SARAH

Provider ID: 295361

Board Certified Specialty: No

📍 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-4003

Fax: (858) 560-6798

📞 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1144614066

🗒 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TONJES, ERIKA

Provider ID: 298019

Board Certified Specialty: No

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

📞 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1205540812

🗒 Provider English Spoken: Y

🗒 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL):
N

☯ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TONJES, ERIKA

Provider ID: 298018

Board Certified Specialty: No

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-9676

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-9676

Provider Gender: Female

NPI: 1205540812

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

☯ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215477

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

☯ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TURNER, ELIZABETH

Provider ID: 255601

Board Certified Specialty: No

📍 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

☎ Phone: (858) 534-8019

🕒 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1326570045

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

☯ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

VIBAL-POASTER, MARIA

Provider ID: 205651

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1376046680

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

☯ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

VILLALOBOS, REBECA

Provider ID: 294770

Board Certified Specialty: No

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 515-2510

🕒 After Hours Phone: (619)
515-2300

Provider Gender: Female

NPI: 1184224396


☑ Provider English Spoken: Y

☑ Provider Language(s)

D3. 專業提供者目錄

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*




 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

VILLALOBOS, REBECA


Provider ID: 294769

Board Certified Specialty: No

 823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

Provider Gender: Female

NPI: 1184224396

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

WALDRUP, LA'RHONDA

Provider ID: 299260

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5888*
Fax: (858) 966-7483

 *After Hours Phone: (858) 966-5888*

Provider Gender: Female

NPI: 1831627181

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

WHITEHURST, UNIQUE

Provider ID: 306075

Board Certified Specialty: No

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*
Fax: (619) 428-7952

 *After Hours Phone: (619) 662-4100*

Provider Gender: Female

NPI: 1124800214

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

WOO, ANDY

Provider ID: 299916

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1609450550

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299941

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

D3. 專業提供者目錄


NPI: 1902368319

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


ALFONSO, ALVIN

Provider ID: 256374

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952653404

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

AMADOR, LINDSAY

Provider ID: 291388

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003556184


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


APPLEGET, JOSEPH

Provider ID: 239602

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568980472

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST


BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No

 286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

 Phone: (619) 564-8249

 After Hours Phone: (619)
564-8249

Provider Gender: Male

NPI: 1750366928

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240763

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

D3. 專業提供者目錄

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
BILLINGTON, KATHERINE

Provider ID: 262246
Board Certified Specialty: No
 286 EUCLID AVE STE 109
SAN DIEGO, CA 92114
 Phone: (619) 564-8249
 After Hours Phone: (619) 564-8249

Provider Gender: Female
NPI: 1962787366

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
BOEING, KRISTINA

Provider ID: 274397
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female

NPI: 1205134301
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
BURROWS, TERENCE

Provider ID: 256694
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023194560

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
DOLLAND, STEVEN

Provider ID: 280552
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982059044

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
FERRITER, STACY

Provider ID: 265295
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

D3. 專業提供者目錄

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780725556

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

GARCIA, CALVIN

Provider ID: 217365

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427419944

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

GONZALEZ, LISA

Provider ID: 299905

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194134114

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1487213500

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

D3. 專業提供者目錄

SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

VINCENT, BERLIN

Provider ID: 291454

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144987801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301715

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301714

Board Certified Specialty: No

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

EKHOLM, JANNA

Provider ID: 290584

Board Certified Specialty: No

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1588977151

Provider English Spoken: Y
Cultural Competency: N



Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):



D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210018
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




CERTIFIED REGISTERED NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210019
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A



CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210052
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475



 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):


N
 Accessibility: CONTACT




PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA




Provider ID: 210053
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A




CERTIFIED REGISTERED NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210041
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1285667741

 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



CERTIFIED REGISTERED

NURSE MIDWIFE




HIRSCH, JENNIFER

Provider ID: 210058
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1891752069

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED REGISTERED



NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210055
Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (619) 543-7878*
 *After Hours Phone: (619)*
543-7878

Provider Gender: Female
NPI: 1891752069

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish




Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210054
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (619) 543-7878*
 *After Hours Phone: (619)*
543-7878

Provider Gender: Female
NPI: 1891752069

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N
 *Accessibility: CONTACT*

PROVIDER
 *Website: N/A*


CERTIFIED REGISTERED

NURSE MIDWIFE



NATHAN, CARLY

Provider ID: 301047
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1235670977

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED REGISTERED

NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301048
Board Certified Specialty: No
 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1235670977


 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


PERDION, KAREN

Provider ID: 210134

Board Certified Specialty: No

 4168 FRONT ST

SAN DIEGO, CA 92103


 Phone: (619) 543-7878

Fax: (619) 543-2366

 After Hours Phone: (619) 543-7878

Provider Gender: Female

NPI: 1518916857

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

PERDION, KAREN

Provider ID: 210137

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127




Phone: (800) 926-8273



After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518916857

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

BUI, MAI


Provider ID: 125052

Board Certified Specialty: No

 5354 UNIVERSITY AVE STE

3

SAN DIEGO, CA 92105


 Phone: (619) 692-3211

Fax: (619) 640-3211

 After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER



Hours: M-F

9:00AM-5:00PM




Website: N/A

CHIROPRACTOR


BUI, MAI

Provider ID: 295791

Board Certified Specialty: No

 5354 UNIVERSITY AVE STE 3

SAN DIEGO, CA 92105

 Phone: (619) 692-3211


Fax: (619) 640-3211

 After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

 Website: N/A

CHIROPRACTOR


BUI, MAI

Provider ID: 289496

Board Certified Specialty: No

 10717 CAMINO RUIZ STE 137

SAN DIEGO, CA 92126

 Phone: (619) 692-3211

Fax: (619) 640-3211


 After Hours Phone: (619) 692-3211

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1780901264

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-6:00PM

W 9:00AM-6:00PM

F 9:00AM-2:00PM

 Website: N/A

CHIROPRACTOR


CASTRO, DAVID

Provider ID: 293322

Board Certified Specialty: No

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733


Fax: (619) 628-5550


 After Hours Phone: (619)

429-3733

Provider Gender: Male

NPI: 1841557733

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH


Provider ID: 291546

Board Certified Specialty: No

 9995 CARMEL MOUNTAIN

RD STE D

SAN DIEGO, CA 92129

 Phone: (844) 200-2426


Fax: (619) 399-5959


 After Hours Phone: (844)

200-2426

Provider Gender: Male

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH


Provider ID: 291547

Board Certified Specialty: No

 10737 CAMINO RUIZ STE

235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426


Fax: (619) 399-5959


 After Hours Phone: (844)

200-2426

Provider Gender: Male

NPI: 1821463159

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CHIROPRACTOR


LUU, DANIEL

Provider ID: 269883

Board Certified Specialty: No

 4419 EUCLID AVE STE 105

SAN DIEGO, CA 92115

 Phone: (619) 287-1235

Fax: (619) 255-6406


 After Hours Phone: (619)

287-1235

Provider Gender: Male

NPI: 1225108269

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 10:00AM-6:00PM

TU 10:00AM-2:00PM

W 10:00AM-6:00PM

TH 10:00AM-2:00PM

F 10:00AM-6:00PM

 Website: N/A

CHIROPRACTOR

D3. 專業提供者目錄

ROBINSON, DEAN

Provider ID: 300848

Board Certified Specialty: No

4290 POLK AVE

SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1851320337

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 300847

Board Certified Specialty: No

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1851320337

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:30AM-5:30PM

Website: N/A

DERMATOLOGY

CALAME, ANTOANELLA

Provider ID: 290301

Board Certified Specialty: No

6605 NANCY RIDGE DR

SAN DIEGO, CA 92121

Phone: (858) 750-2983

Fax: (858) 750-2984

After Hours Phone: (858)
750-2983

Provider Gender: Female

NPI: 1285817569

Provider English Spoken: Y

Provider Language(s)
Spoken: Romanian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, YUMA

REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

FABRIKANT, JORDAN

Provider ID: 262275

Board Certified Specialty: No

4060 4TH AVE STE 415

SAN DIEGO, CA 92103

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)
298-9809

Provider Gender: Male

NPI: 1649585753

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

DERMATOLOGY

KANNAN, SWATI

Provider ID: 286287

Board Certified Specialty: No

8899 UNIVERSITY CENTER

LN STE 350

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508155227

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

D3. 專業提供者目錄


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053734905

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


KOZMA, BONITA

Provider ID: 269301


Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1659654598

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
PROVIDENCE SAINT JOHNS

HEALTH CENTER, SANTA
MONICA UCLA MED CTR,
RONALD REAGAN UCLA MED

CTR, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


SHI, VERONICA

Provider ID: 286335

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


SHI, VERONICA

Provider ID: 271713


Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8322

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

DERMATOLOGY

SINGH, GAURAV

Provider ID: 272612
Board Certified Specialty: No
8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1184073801
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270913
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269291
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1811289093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los

Angeles General Medical
Center, TEMECULA VALLEY
HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271136
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

D3. 專業提供者目錄

EMERGENCY MEDICINE


BARRY, JEFFREY

Provider ID: 271130

Board Certified Specialty: No

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (855) 535-5864

Fax: (888) 539-8781

 After Hours Phone: (855) 535-5864

Provider Gender: Male

NPI: 1801207006

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801207006

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA Provider ID: 270333

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271129

Board Certified Specialty: No

 4520 EXECUTIVE DR STE

P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801207006

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Board Certified Specialty: No

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


BELLINGHAUSEN, AMY

Provider ID: 270336

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273




Provider Gender: Female

NPI: 1801206354

D3. 專業提供者目錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270334
Board Certified Specialty: No
 *4168 FRONT ST*
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1801206354


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE

CASTELLANO, TIFFANY





Provider ID: 301706
Board Certified Specialty: No
 *200 W ARBOR DR*
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1063893063

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

EMERGENCY MEDICINE









CASTELLANO, TIFFANY

Provider ID: 279314
Board Certified Specialty: No
 *16950 VIA TAZON*
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female

NPI: 1063893063
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287430
Board Certified Specialty: No
 *16950 VIA TAZON*
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1427476597
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

D3. 專業提供者目錄


EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287428

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


COLLINS, CATHLEEN

Provider ID: 285133

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1205128089

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 303036

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-7051

Fax: (619) 543-3115

 After Hours Phone: (619)
543-7051

Provider Gender: Male

NPI: 1043590169

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO, EL CENTRO


REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


GUITTARD, JESSE

Provider ID: 239879

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619)
543-6400

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: EL CENTRO


REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


HERNANDEZ, CRISTINA

Provider ID: 242544

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273



Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y







 Provider Language(s)

D3. 專業提供者目錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*








EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 301711
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1043705296
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*





EMERGENCY MEDICINE




HORNBEAK, KIRSTEN

Provider ID: 240022
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1205214442
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE









KUTZ, CRAIG

Provider ID: 283845
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1598295925
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL

CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1396270278
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-8:00PM*
 *Website: N/A*

EMERGENCY MEDICINE

D3. 專業提供者目錄

MCDANIEL, MICHELE

Provider ID: 246901

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366761959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

MUELLER, MATTHEW

Provider ID: 280657

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003355629

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239797

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6400

After Hours Phone: (619)
543-6400

Provider Gender: Female

NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 605-4441

After Hours Phone: (858)
605-4441

Provider Gender: Female

NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU
8:00AM-10:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-10:00PM

Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

D3. 專業提供者目錄

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1366478372

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304937

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1811423072

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

☎ After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1811423072

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240159

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (858) 657-7000

☎ After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1821487430

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441

Board Certified Specialty: No

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457747883

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE

SLOANE, CHRISTIAN

Provider ID: 209518
Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841233145


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


TANAKA, HIDEAKI

Provider ID: 240124

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124280730

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,


Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269936

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301708

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1528564150

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


BOEDER, SCHAFER

Provider ID: 255611

Board Certified Specialty: No



 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1477808285

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


D3. 專業提供者目錄


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1083922462

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Sinhala, Spanish*
Cultural Competency: N



Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

ENDOCRINOLOGY


METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*


Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1083922462

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Sinhala, Spanish*
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ENDOCRINOLOGY


METABOLISM DIABETES

GUERIN, CHRIS

Provider ID: 284646

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1275648875


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (858) 657-7298

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1265695795

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Mandarin*
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

D3. 專業提供者目錄


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (619) 543-6500

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932324175

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287781

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 287780

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 287782

Board Certified Specialty: No

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 287779

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female

NPI: 1720474141

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091

Board Certified Specialty: No

📍 4168 FRONT ST

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (858) 657-7298

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518163799

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

TANTISIRA, LALITA

Provider ID: 286323

Board Certified Specialty: No

📍 4303 LA JOLLA VILLAGE DR STE 2110

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1508874298

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL

Provider ID: 299363

Board Certified Specialty: No

📍 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

🕒 After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1629480272

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL

Provider ID: 299743

Board Certified Specialty: No

📍 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

🕒 After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1629480272

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,

PARADISE VALLEY HOSPITAL


D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL): Provider ID: 304814

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 301761

Board Certified Specialty: No

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113


 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1497821318

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY

Provider ID: 304813

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1497821318

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM


 Website: N/A

FAMILY PRACTICE


BERNADETT, ALEX

Provider ID: 296739

Board Certified Specialty: No

 6699 ALVARADO RD STE
2100

SAN DIEGO, CA 92120

 Phone: (619) 229-3909

Fax: (619) 229-3902

 After Hours Phone: (619)
229-3909

Provider Gender: Male

NPI: 1215382841

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


BERNADETT, ALEX

Provider ID: 296740

Board Certified Specialty: No

 10505 SORRENTO VALLEY
RD STE 200

SAN DIEGO, CA 92121

 Phone: (858) 793-7860

Fax: (858) 436-1289

D3. 專業提供者目錄

 After Hours Phone: (858)
793-7860

Provider Gender: Male

NPI: 1215382841

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

CAMPBELL, BRIANNA


Provider ID: 298950

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316479892

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

FAMILY PRACTICE

CHEN, ALICE


Provider ID: 207163

Board Certified Specialty: No

 9333 GENESEE AVE STE
200


SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


CHEN, ALICE


Provider ID: 207167

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE


CHEN, ALICE

Provider ID: 207164

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER



D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE


HILL, LINDA


Provider ID: 293210
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1467434811

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM



 Website: N/A

FAMILY PRACTICE

HILL, LINDA

Provider ID: 293211
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Female
NPI: 1467434811

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

FAMILY PRACTICE

JOHN, TANNER

Provider ID: 303515
Board Certified Specialty: No
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
Fax: (619) 595-0258
 After Hours Phone: (619)
662-4100


Provider Gender: Male
NPI: 1043707326

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300060
Board Certified Specialty: No
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1114366192

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057
Board Certified Specialty: No
 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
 Phone: (858) 249-6890
 After Hours Phone: (858)
249-6890

Provider Gender: Female
NPI: 1114366192

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 專業提供者目錄

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058

Board Certified Specialty: No

9333 GENESEE AVE
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847

Board Certified Specialty: No

2630 1ST AVE
SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0505

After Hours Phone: (619)
234-2158

Provider Gender: Male

NPI: 1861637217

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1275945446


Provider English Spoken: Y

D3. 專業提供者目錄

Provider Language(s)

Spoken: Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

FAMILY PRACTICE

PERESS, LILIA


Provider ID: 304277
Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1275945446


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Ukrainian


Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293216

Board Certified Specialty: Yes

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925


Provider Gender: Male
NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293217

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male
NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 299244

Board Certified Specialty: No

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100
Fax: (619) 238-3807

 After Hours Phone: (619)
662-4100


Provider Gender: Male
NPI: 1316479603


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A


FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 302648

Board Certified Specialty: No

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114




 Phone: (619) 662-4100
Fax: (619) 263-9601

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1558897009





 Provider English Spoken: Y


D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

FAMILY PRACTICE






SUMMERS-DAY, COURTNEY




Provider ID: 290976
Board Certified Specialty: Yes
 1016 OUTER RD
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
Fax: (619) 628-5550
 *After Hours Phone: (619) 429-3733*
Provider Gender: Female
NPI: 1124288873
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

FAMILY PRACTICE






VAN PRATT LEVIN, BENJAMIN




Provider ID: 302531
Board Certified Specialty: No
 1016 OUTER RD
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
Fax: (619) 328-5550
 *After Hours Phone: (619) 429-3733*
Provider Gender: Male
NPI: 1619438330
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

FAMILY PRACTICE








VO, PHU LUONG

Provider ID: 303332
Board Certified Specialty: No
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619) 662-4100*
Provider Gender: Female
NPI: 1043849177
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Vietnamese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT

Provider ID: 271539
Board Certified Specialty: No
 9878 CARMEL MOUNTAIN RD STE B
SAN DIEGO, CA 92129
 *Phone: (858) 312-1440*
Fax: (760) 788-7983
 *After Hours Phone: (858) 312-1440*
Provider Gender: Male
NPI: 1104845536
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272837
Board Certified Specialty: No
 200 W ARBOR DR

D3. 專業提供者目錄

SAN DIEGO, CA 92103
☎ Phone: (619) 543-2347
Fax: (858) 657-7259
🕒 After Hours Phone: (619) 543-2347
Provider Gender: Male
NPI: 1861626814
🗒 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 304187
Board Certified Specialty: No
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861626814
🗒 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

GASTROENTEROLOGY

BAUMAN, LAURA

Provider ID: 260041
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
🕒 After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1255697850
🗒 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450
Board Certified Specialty: No
📍 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450
Board Certified Specialty: No
📍 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1588081814
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 304204
Board Certified Specialty: No
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588081814
🗒 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951
Board Certified Specialty: No
📍 200 W ARBOR DR

D3. 專業提供者目錄

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1780047597
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

GASTROENTEROLOGY

HILDRETH, AMBER

Provider ID: 280464
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
🕒 After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1548521511
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F

8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

KUMAR, SOMA

Provider ID: 205377
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
🕒 After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1356502520
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296066
Board Certified Specialty: No
📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
☎ Phone: (619) 266-3332
Fax: (619) 266-6006
🕒 After Hours Phone: (619) 266-3332
Provider Gender: Female

NPI: 1770961971
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

GASTROENTEROLOGY

POLK, DAVID

Provider ID: 275449
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (760) 294-9260
Fax: (760) 294-9274
🕒 After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1427140839
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. 專業提供者目錄


CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


REDDY, JOSEPH

Provider ID: 27748

Board Certified Specialty: Yes

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

 Phone: (619) 588-4074


Fax: (619) 588-4004

 After Hours Phone: (619)
588-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


REDDY, JOSEPH

Provider ID: 290034

Board Certified Specialty: Yes

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120


 Phone: (619) 588-4074


Fax: (619) 588-4004

 After Hours Phone: (619)
588-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

SHAFFER, KATHERINE

Provider ID: 295712

Board Certified Specialty: No

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)

266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE


VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 304178

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY


SHAH, SHAILJA

Provider ID: 283896

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 304186

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 125077

Board Certified Specialty: No



 3490 PALM AVE
SAN DIEGO, CA 92154

 Phone: (619) 423-5616
Fax: (619) 423-5684

 After Hours Phone: (619)
423-5616

Provider Gender: Male

NPI: 1952312621

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 2\150

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 294650

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 302348

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 966-5840

Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS MEDICAL

DEL CAMPO CASANELLES, MIGUEL


Provider ID: 206013

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123



 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Male

NPI: 1598141475

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Italian,
Portuguese, Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS MEDICAL


MARDACH, REBECCA

Provider ID: 241946

Board Certified Specialty: No


 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840

 After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1457330607

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, UC
DAVIS MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GENETICS MEDICAL

MARDACH, REBECCA

Provider ID: 241947

D3. 專業提供者目錄

Board Certified Specialty: No
3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5840

After Hours Phone: (858)
966-5840

Provider Gender: Female

NPI: 1457330607

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, UC
DAVIS MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268691

Board Certified Specialty: No

9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)
278-9911

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268689

Board Certified Specialty: No

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268653

Board Certified Specialty: No

9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)
278-9911

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268652

Board Certified Specialty: No

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303059

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1245694801

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


HEMATOLOGY / ONCOLOGY

LEE, KAREN

Provider ID: 284165

Board Certified Specialty: No

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1518352970

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

NGUYEN, ANTHONY

Provider ID: 301060

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295153575

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA


LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


PAUL, MEGAN

Provider ID: 274499

Board Certified Specialty: No

 3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1427495894

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272716

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861810830

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY

Provider ID: 273188

Board Certified Specialty: No

 9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1598007924

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 245573

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1811200652

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 276671

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1811200652

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 *Phone: (619) 662-4100*

Fax: (619) 205-6384

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1073650339

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

INFECTIOUS DISEASE








BAMFORD, LAURA

Provider ID: 276546

Board Certified Specialty: No

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103



D3. 專業提供者目錄

 Phone: (619) 543-6382
 Fax: (888) 539-8781
 After Hours Phone: (619) 543-6382
Provider Gender: Female
NPI: 1750435996
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE


DEISS, ROBERT




Provider ID: 258330
Board Certified Specialty: No
 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (619) 543-3995
 After Hours Phone: (619) 543-3995
Provider Gender: Male
NPI: 1194977652
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE



HORTON, LUCY




Provider ID: 240887
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427324821
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE






KUPPALLI, KRUTIKA

Provider ID: 301058
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1093193583
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225
Board Certified Specialty: No
📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
☎ Phone: (619) 543-5890
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (619)
543-5890

Provider Gender: Male

NPI: 1093193583

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

MOODLEY, AMARAN

Provider ID: 208558
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (885) 966-7785
📠 Fax: (858) 966-8658
🕒 After Hours Phone: (885)
966-7785

Provider Gender: Male

NPI: 1104023670

📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

PANNARAJ, PIA

Provider ID: 301026
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-7785
📠 Fax: (858) 966-8658

🕒 After Hours Phone: (858)
966-7785

Provider Gender: Female
NPI: 1942478524

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, HOLLYWOOD
PRESBYTERIAN MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INFECTIOUS DISEASE

PROMER, KATHERINE

Provider ID: 258545
Board Certified Specialty: No
📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306280607

📄 Provider English Spoken: Y
📄 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL
HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

RAJAGOPAL, AMUTHA






Provider ID: 221088
Board Certified Specialty: No
📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103



D3. 專業提供者目錄

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1124465745
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE








RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 299946
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Website: N/A



INFECTIOUS DISEASE






TOVAR PADUA, LEIDY

Provider ID: 205357
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 Phone: (858) 966-7785
Fax: (858) 966-8658
 After Hours Phone: (858) 966-7785
Provider Gender: Female
NPI: 1033491311
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH
MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INFECTIOUS DISEASE






TOVAR PADUA, LEIDY

Provider ID: 265093
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1033491311
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES, LONG BEACH
MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

ARUTYUNOV, BORIS

Provider ID: 201910
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 471-9186
 After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1144562703
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: GOOD
SAMARITAN HOSPITAL, PIH
HEALTH GOOD SAMARITAN
HOSPITAL, SUTTER MEDICAL
CENTER SACRAMENTO, UCSD

D3. 專業提供者目錄

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294137

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1689646275


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294136

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1689646275

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (760) 471-9186

Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


CHENG, GEORGE

Provider ID: 247639

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No

 200 W ARBOR DR

D3. 專業提供者目錄

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1417343732
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE

GELBERG, ANNA

Provider ID: 285638
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104004258

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, HOAG MEMORIAL

HOSPITAL PRESBYTERIAN, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497791339

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286343
Board Certified Specialty: No
📍 4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497791339

🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INTERNAL MEDICINE

HASTIE, ELIZABETH

Provider ID: 291431
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female

D3. 專業提供者目錄

NPI: 1154818797

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INTERNAL MEDICINE


HOGARTH, MICHAEL

Provider ID: 214386

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON, UC


DAVIS MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


JABBOUR, MOUSSA

Provider ID: 256659

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

JIANG, JUN

Provider ID: 291415

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447792171

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INTERNAL MEDICINE


KATZ, YISRAEL

Provider ID: 272936

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730507872

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103



 Phone: (619) 543-6222

 After Hours Phone: (619)
543-6222

Provider Gender: Female

NPI: 1366855355

D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


LAGO HERNANDEZ, CARLOS

Provider ID: 238622

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA



JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274411

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


LAM, MICHAEL

Provider ID: 274410

Board Certified Specialty: No

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

LEVERONE, NICHOLAS

Provider ID: 272692

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407388564

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY




THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

D3. 專業提供者目錄


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE




MAJITHIA, AMIT

Provider ID: 255882
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male
NPI: 1801091459




 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

MARTINEZ, ARMANDO


Provider ID: 291421
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*


926-8273
Provider Gender: Male
NPI: 1598261091
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




INTERNAL MEDICINE

MUNCE, DANIELLE

Provider ID: 272577
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1740644509
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

INTERNAL MEDICINE

NAIDZIONAK, ULADZISLAU




Provider ID: 290567
Board Certified Specialty: No
 7930 FROST ST STE 405
SAN DIEGO, CA 92123
 *Phone: (858) 237-0572*
 *After Hours Phone: (858)
237-0572*

Provider Gender: Male
NPI: 1023246212

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Russian*




Cultural Competency: N
*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL*

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: TU 9:00AM-4:00PM
TH 9:00AM-4:00PM*
 *Website: N/A*

INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287582
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1487040051


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273962

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222

Fax: (619) 543-8255

 After Hours Phone: (619)
543-6222

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SHAHATTO, LOBNA

Provider ID: 201324

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-7000

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1477879906

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SMITH, CHELSEY

Provider ID: 239920

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (858) 657-6110

 After Hours Phone: (858)
657-6110

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275926

Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927

Board Certified Specialty: No

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1508874298

🗨 Provider English Spoken: Y

🗨 Provider Language(s) Spoken: Thai

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033572995

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053765909

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730133976

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534

Board Certified Specialty: No

📍 4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121

☎ Phone: (855) 355-5864

Fax: (888) 539-8781

📞 After Hours Phone: (855) 355-5864

Provider Gender: Female

NPI: 1730133976

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS



MEMORIAL HOSPITAL, UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

D3. 專業提供者目錄

American Sign Language (ASL):  Phone: (800) 926-8273
N
 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1235660887

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


YANG, JENNY

Provider ID: 283027

Board Certified Specialty: No

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP


CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447351085

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MERCY

GENERAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300061

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERVENTIONAL

CARDIOLOGY

KINGDON, TYLER

Provider ID: 301814

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1477084283

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSPITAL OF

ORANGE COUNTY, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 302987

Board Certified Specialty: No

6402 EL CAJON BLVD STE
102

D3. 專業提供者目錄

SAN DIEGO, CA 92115
☎ Phone: (619) 582-4490
Fax: (619) 582-4737
🕒 After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1154323996
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 301306
Board Certified Specialty: No

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
☎ Phone: (619) 582-4490
Fax: (519) 582-4737
🕒 After Hours Phone: (619)
582-4490
Provider Gender: Male
NPI: 1154323996
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, TRI CITY MEDICAL
CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295844
Board Certified Specialty: No
📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
☎ Phone: (619) 616-2100
Fax: (619) 616-2104
🕒 After Hours Phone: (619)
616-2100
Provider Gender: Female
NPI: 1811307051
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296050
Board Certified Specialty: No
📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
☎ Phone: (619) 616-2100
Fax: (619) 616-2104
🕒 After Hours Phone: (619)
616-2100
Provider Gender: Female
NPI: 1811307051
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

D3. 專業提供者目錄


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


LICENSED PROFESSIONAL CLINICAL COUNSELOR

GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No

 3025 BEYER BLVD
SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR


NAKAMURA, TIFFANY


Provider ID: 239584

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
315


SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1356846349

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 272670

Board Certified Specialty: No

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123


 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA

Provider ID: 277179

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL


HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

D3. 專業提供者目錄

MEDICINE

EMERUWA, UKACHI

Provider ID: 300012

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300010

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300011

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208640

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 210034

Board Certified Specialty: No

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL): **MEDICINE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277260

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL

MELBER, DORA

Provider ID: 296990

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123



 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296998

Board Certified Specialty: No

 7910 FROST ST STE 220
SAN DIEGO, CA 92123


 Phone: (858) 966-6710

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296989

Board Certified Specialty: No

 7910 FROST ST STE 430
SAN DIEGO, CA 92123

 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

D3. 專業提供者目錄


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296994

Board Certified Specialty: No

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123


 Phone: (858) 966-6710


Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MOORE, THOMAS


Provider ID: 208644

Board Certified Specialty: No

 4910 DIRECTORS PL STE
200


SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE


MOORE, THOMAS

Provider ID: 208643

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184682379

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294648

Board Certified Specialty: No

 7910 FROST ST STE 220
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294647

Board Certified Specialty: No

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 214436

Board Certified Specialty: No

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277314

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277304

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY

MEDICAL CTR, Sharp
Grossmont Hospital, Sharp

Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄


 Website: N/A


MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277307

Board Certified Specialty: No

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp


Grossmont Hospital, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

SHANNON, KELLI

Provider ID: 208474

Board Certified Specialty: No

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1922156397

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084

Board Certified Specialty: No

 7910 FROST ST STE 220
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 277353

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710




Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N





Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG



D3. 專業提供者目錄

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE





WESTERMANN, MELISSA




Provider ID: 242522
Board Certified Specialty: No
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 939-4102
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1760730758
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE





WILLIAMS, KRISTIN

Provider ID: 277387
Board Certified Specialty: No
 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


MATERNAL AND FETAL MEDICINE


WILLIAMS, KRISTIN

Provider ID: 277383
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


WOLF, RICHARD


Provider ID: 209253

Board Certified Specialty: No

 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE


BAI-TONG, SHIYU

Provider ID: 283285

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE

CARROLL, JEANNE

Provider ID: 205727

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1386928224

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE


DEL ROSARIO, PAMELA

Provider ID: 295000

Board Certified Specialty: No

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1952691941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205645
Board Certified Specialty: No

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1679809826

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

GLENN, TARA

Provider ID: 283159

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1992060974

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294251

Board Certified Specialty: No

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1245617489

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE

Provider ID: 205941

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA, EL CENTRO REGIONAL
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL




Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT


D3. 專業提供者目錄

 **PROVIDER**
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

HONOLD, JOSE

Provider ID: 242881
Board Certified Specialty: No
 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 691-7000
 After Hours Phone: (619)
691-7000
Provider Gender: Male
NPI: 1093886855
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, EL CENTRO REGIONAL
MEDICAL CENTER, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE


LANE, BRIAN

Provider ID: 205707
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Male
NPI: 1427129287
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 205630
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858)
966-5818
Provider Gender: Female
NPI: 1003028416
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206208

D3. 專業提供者目錄

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206210

Board Certified Specialty: No

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-8022

Fax: (858) 966-8457

After Hours Phone: (858)
966-8022

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206206

Board Certified Specialty: No

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (619) 543-3812

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

MATOKA, NANA

Provider ID: 297974

Board Certified Specialty: No

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 249-5839

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

D3. 專業提供者目錄

MATOBA, NANA

Provider ID: 299894

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5888

Fax: (858) 966-7483

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297975

Board Certified Specialty: No

4077 5TH AVE
SAN DIEGO, CA 92103

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1235304155

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL

MEDICINE

MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No

3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

Phone: (858) 966-5888

After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1942253356

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262157

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1497941397

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

D3. 專業提供者目錄


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7107

 After Hours Phone: (619)
260-7107

Provider Gender: Female

NPI: 1497941397


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301819

Board Certified Specialty: No

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046

Fax: (619) 686-3843

 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

ODONNELL, F JANE

Provider ID: 205578

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1477625325

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL):  Website: N/A

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206060

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759
Fax: (619) 543-3812

 After Hours Phone: (619)
543-3759

Provider Gender: Male

NPI: 1205047545

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206171

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759
Fax: (619) 543-3812

 After Hours Phone: (619)
543-3759

Provider Gender: Female

NPI: 1649433103

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303906

Board Certified Specialty: No

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046

 After Hours Phone: (619)

260-7046

Provider Gender: Male

NPI: 1538388988


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904

Board Certified Specialty: No

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

D3. 專業提供者目錄

Provider Gender: Male
NPI: 1538388988
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SONG, RICHARD

Provider ID: 206143
Board Certified Specialty: No
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-5818
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5818
Provider Gender: Male

NPI: 1881893477
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 206126
Board Certified Specialty: No
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-5888
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5888
Provider Gender: Male
NPI: 1801978143
☐ Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE




SUTTNER, DENISE

Provider ID: 265085
Board Certified Specialty: No
📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123
☎ Phone: (858) 966-5818
Fax: (858) 966-7483
🕒 After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1457433799
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY N HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182
Board Certified Specialty: No




 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818

Provider Gender: Female
NPI: 1164572632

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE




Provider ID: 303808
Board Certified Specialty: No

 3010 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 249-5839
 After Hours Phone: (858) 966-5888

Provider Gender: Female
NPI: 1417121971

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE




Provider ID: 303806
Board Certified Specialty: No

 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5888
Fax: (858) 966-7483
 After Hours Phone: (858) 966-5888

Provider Gender: Female
NPI: 1417121971

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE





VOLLER, STEPHANNIE

Provider ID: 303807
Board Certified Specialty: No

 8001 FROST ST SAN DIEGO, CA 92123
 Phone: (858) 966-8052
Fax: (858) 966-7789
 After Hours Phone: (858) 966-8052

Provider Gender: Female
NPI: 1417121971

D3. 專業提供者目錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEONATAL / PERINATAL **MEDICINE**





WEISS, KATHERINE




Provider ID: 264677
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5818*
Fax: (858) 966-7483
 *After Hours Phone: (858)*
966-5818
Provider Gender: Female
NPI: 1053541862

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

NEONATAL / PERINATAL **MEDICINE**





WEST, JULIE





Provider ID: 297073
Board Certified Specialty: No
 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 *Phone: (858) 966-5888*
Fax: (858) 249-5839
 *After Hours Phone: (858)*
966-5888
Provider Gender: Female
NPI: 1811151848
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEPHROLOGY







QUEVEDO, JUAN

Provider ID: 269998
Board Certified Specialty: No
 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
 *Phone: (619) 263-9729*
Fax: (619) 263-9730
 *After Hours Phone: (619)*
263-9729
Provider Gender: Male
NPI: 1093902496
 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

NEPHROLOGY

SHAH, MITA

Provider ID: 262230
Board Certified Specialty: No
 8010 FROST ST STE 510
SAN DIEGO, CA 92123
 *Phone: (858) 637-4700*
Fax: (858) 637-4701
 *After Hours Phone: (858)*
637-4700
Provider Gender: Female
NPI: 1194773010
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

D3. 專業提供者目錄


NEPHROLOGY

THOMAS, THEODORE

Provider ID: 262359

Board Certified Specialty: No

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Male

NPI: 1669477113

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KINDRED

HOSPITAL SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296054

Board Certified Specialty: No

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296053

Board Certified Specialty: No

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

 Phone: (619) 299-2350


Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BEVINS, ELIZABETH

Provider ID: 241943

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female




NPI: 1013395151


D3. 專業提供者目錄




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

BUI, JONATHAN

Provider ID: 303227
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Male
NPI: 1730247974

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



NEUROLOGY

BUI, JONATHAN

Provider ID: 206005
Board Certified Specialty: No
 8001 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5999

Provider Gender: Male
NPI: 1730247974

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

COUGHLIN, DAVID


Provider ID: 240951
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1740543784

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

NEUROLOGY


COUGHLIN, DAVID

Provider ID: 240949
Board Certified Specialty: Yes
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1740543784

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM




 Website: N/A

NEUROLOGY

COUGHLIN, DAVID

Provider ID: 304172
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)

D3. 專業提供者目錄

926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

DOVE, KATHERINE

Provider ID: 302784
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Female
NPI: 1033642574
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





NEUROLOGY



DUNN-PIRIO, ANASTASIE

Provider ID: 203235
Board Certified Specialty: No
 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (619) 543-3500
Fax: (888) 539-8781
 After Hours Phone: (619)
543-3500
Provider Gender: Female
NPI: 1700177136
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY


DUNN-PIRIO, ANASTASIE

Provider ID: 304160
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1700177136
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 576-8412
 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1548657992
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335
Board Certified Specialty: No
 3020 CHILDRENS WAY

D3. 專業提供者目錄

SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 576-8412
🕒 After Hours Phone: (858) 966-5999
Provider Gender: Male
NPI: 1568773984
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 303287
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5819
Fax: (858) 966-4930
🕒 After Hours Phone: (858) 966-5819
Provider Gender: Male
NPI: 1568773984
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

GUIDO-ESTRADA, NATALIE

Provider ID: 303271
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5819
Fax: (858) 966-4930
🕒 After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1528353521
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

GUNDOGDU, MELEK

Provider ID: 201623
Board Certified Specialty: No
📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
☎ Phone: (619) 543-3500
🕒 After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1437253671
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

NEUROLOGY

HANNAWI, ANDREW







Provider ID: 283154
Board Certified Specialty: No
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5999
Fax: (858) 576-8412
🕒 After Hours Phone: (858) 966-5999
Provider Gender: Male
NPI: 1194179135
🗣 Provider English Spoken: Y
🗣 Provider Language(s)

D3. 專業提供者目錄

Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*









NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 304154
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1053326710
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




NEUROLOGY





KHAMISHON, BORIS

Provider ID: 269923
Board Certified Specialty: No
 6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
 *Phone: (619) 582-2595*
 *After Hours Phone: (619) 582-2595*
Provider Gender: Male
NPI: 1104922038
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Russian, Samoan, Spanish*
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8:00AM-4:00PM F 8:00AM-3:00PM*
 *Website: N/A*

NEUROLOGY




KIM MCMANUS, OLIVIA

Provider ID: 303229
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
 *Phone: (858) 966-5819*
Fax: (858) 966-4930
 *After Hours Phone: (858) 966-5819*

Provider Gender: Female
NPI: 1174870067
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEUROLOGY


LAVERTY, CHAMINDRA

Provider ID: 303258
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
 *Phone: (858) 966-5819*
Fax: (858) 966-4930
 *After Hours Phone: (858) 966-5819*
Provider Gender: Female
NPI: 1538320395
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY


LEE, DAVID

Provider ID: 246263

Board Certified Specialty: No


 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

LEE, DAVID

Provider ID: 304198

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


NEUROLOGY

LEGER, GABRIEL

Provider ID: 304176

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720367899

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


LEGER, GABRIEL


Provider ID: 247608

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (858) 543-8540

 After Hours Phone: (858)
543-8540

Provider Gender: Male

NPI: 1720367899

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346

Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female




D3. 專業提供者目錄

NPI: 1801215926

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY



LONGARDNER, KATHERINE


Provider ID: 304197
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801215926



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

QAYOUMI, WALI





Provider ID: 304161
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1093178220





 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY




QAYOUMI, WALI

Provider ID: 284370
Board Certified Specialty: No
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (619) 294-3746
Fax: (888) 539-8781
 After Hours Phone: (619)
294-3746
Provider Gender: Male
NPI: 1093178220
 Provider English Spoken: Y

 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



NEUROLOGY

RIGGINS, NINA

Provider ID: 285968
Board Certified Specialty: No
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1568655264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: MEDICAL
CTR AT UCSF
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

RIGGINS, NINA

Provider ID: 304200

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1568655264

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian


Cultural Competency: N


Hospital Affiliation: MEDICAL
CTR AT UCSF

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305021

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305020

Board Certified Specialty: No

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305023

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

NEUROLOGY


SWEAT, MARIE

Provider ID: 303831


Board Certified Specialty: No

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1861929036

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A









NEUROLOGY

YANG, JENNIFER

Provider ID: 301593

Board Certified Specialty: No


D3. 專業提供者目錄

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 576-8412
 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1528420619
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY







ZIMBRIC, MICHAEL



Provider ID: 206272
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5999
Provider Gender: Male
NPI: 1487819546
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 303284
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 Phone: (858) 966-5819
Fax: (858) 966-4930
 After Hours Phone: (858)
966-5819
Provider Gender: Male
NPI: 1487819546
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD **GRAVES, JENNIFER**

Provider ID: 261037
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1992849863
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, MEDICAL CTR
AT UCSF, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE
Provider ID: 205825
Board Certified Specialty: No

D3. 專業提供者目錄

8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1528353521

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206074
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999

Provider Gender: Female
NPI: 1275604035
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): NPI: 1346225356
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 290731
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925

Provider Gender: Male
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR

Provider ID: 205940
Board Certified Specialty: Yes
7695 CARDINAL CT STE
390
SAN DIEGO, CA 92123
Phone: (858) 279-8111
Fax: (858) 279-4703
After Hours Phone: (858)
279-8111
Provider Gender: Male

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi,
Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-TH
9:00AM-4:00PM
Website: N/A

Email:
JOSHUACOHENMD@YAHOO.COM

OBSTETRICS / GYNECOLOGY


DELCORE, LAURA

Provider ID: 291330
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291326

Board Certified Specialty: No

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1790128759

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291327

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1790128759

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291329

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1790128759

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291328

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1790128759

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291338

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

D3. 專業提供者目錄

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291339

Board Certified Specialty: No

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291340

Board Certified Specialty: No

330 LEWIS ST

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No

3750 CONVOY ST STE 312

SAN DIEGO, CA 92111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

FRUGONI, GINA

Provider ID: 270056

Board Certified Specialty: No

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (619) 400-5074

After Hours Phone: (619)
400-5074

Provider Gender: Female

NPI: 1578729315

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296002

Board Certified Specialty: No

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4682

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1235218439

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001

Board Certified Specialty: No

D3. 專業提供者目錄

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1235218439

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257548

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA



JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257547

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278917

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208294
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1104143593

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242751
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1972047397
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271560
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1780073635

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271561
Board Certified Specialty: No
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1780073635

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM



Website: N/A

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN



Provider ID: 205481
Board Certified Specialty: No
11939 RANCHO BERNARDO
RD STE 110
SAN DIEGO, CA 92128

D3. 專業提供者目錄

 Phone: (858) 618-1156
 Fax: (858) 618-3314

 After Hours Phone: (858) 618-1156

Provider Gender: Female
NPI: 1679517239


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-4:30PM
F 8:30AM-2:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 208681



Board Certified Specialty: No

 4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1396904876

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL


CTR, EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519

Board Certified Specialty: No



 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1396904876

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 200965


Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1770702177


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303064

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N


D3. 專業提供者目錄

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


MANI, PARVIN

Provider ID: 242345

Board Certified Specialty: No

 5555 RESERVOIR DR STE
208

SAN DIEGO, CA 92120

 Phone: (619) 583-7555

Fax: (619) 583-0555

 After Hours Phone: (619)
583-7555

Provider Gender: Female

NPI: 1518925015

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 10\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

PARVINMANI@YAHOO.COM


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285742

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MELLENDEZ, ARIANA

Provider ID: 299921

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Website: N/A


OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299922

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299982

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978

Board Certified Specialty: No

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299979

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299980

Board Certified Specialty: No

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299981

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696






 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


OBSTETRICS / GYNECOLOGY

PINSON, KELSEY

Provider ID: 284286
Board Certified Specialty: No
 4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1841722485
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





OBSTETRICS / GYNECOLOGY




PINSON, KELSEY

Provider ID: 284287
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1841722485
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY








PINSON, KELSEY

Provider ID: 284288
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1841722485
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284298
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1295263861
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

D3. 專業提供者目錄

OBSTETRICS / GYNECOLOGY

SHAH, NEMI

Provider ID: 272580

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1558715268

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

TEMECULA VALLEY HOSPITAL

INC, LOMA LINDA UNIVERSITY

MED CTR MURRIETA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL

Provider ID: 290708

Board Certified Specialty: No

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1245590124

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284291

Board Certified Specialty: No

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284290

Board Certified Specialty: No

4520 EXECUTIVE DR STE
360

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

D3. 專業提供者目錄

THOMSON, SAMANTHA

Provider ID: 285176

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285174

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 290128

Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206549

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273


Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

D3. 專業提供者目錄





 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

LARSEN, JULIE

Provider ID: 258359
Board Certified Specialty: No
 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122
 Phone: (855) 543-0333
Fax: (858) 657-1809
 After Hours Phone: (855)
543-0333


Provider Gender: Female
NPI: 1497009179


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

MIKUT, ALYSSA




Provider ID: 258415
Board Certified Specialty: No
 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122
 Phone: (858) 249-0832
Fax: (858) 657-1809
 After Hours Phone: (858)
249-0832


Provider Gender: Female
NPI: 1952816134
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI




Provider ID: 205620
Board Certified Specialty: Yes
 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 309-7702
Fax: (858) 966-7403
 After Hours Phone: (858)
309-7702



Provider Gender: Female
NPI: 1871664631
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272789
Board Certified Specialty: No
 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1912325184
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788
Board Certified Specialty: No
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1912325184

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1942662168
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 240636
Board Certified Specialty: No
📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
📠 Fax: (858) 966-7403
🕒 After Hours Phone: (858)
309-7702
Provider Gender: Female
NPI: 1104237353
📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

CAMP, ANDREW

Provider ID: 260020
Board Certified Specialty: No
📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
📠 Fax: (858) 966-7403
🕒 After Hours Phone: (858)
309-7702
Provider Gender: Male
NPI: 1326300377

📄 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313
Board Certified Specialty: Yes
📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
☎ Phone: (619) 688-2648
📠 Fax: (619) 688-2626

D3. 專業提供者目錄

☎ After Hours Phone: (619) 688-2648

Provider Gender: Male

NPI: 1790769156

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 6\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

Email:

MYNEWWEYES@HOTMAIL.COM

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297009

Board Certified Specialty: No

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297011

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-7403

☎ After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 295645

Board Certified Specialty: No

📍 4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

☎ Phone: (619) 283-1303

Fax: (619) 283-1666

☎ After Hours Phone: (619)
283-1303

Provider Gender: Male

NPI: 1871577056

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

🌐 Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 245200

Board Certified Specialty: No

📍 4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

☎ Phone: (619) 283-1303

Fax: (619) 283-1666

☎ After Hours Phone: (619)
283-1303

D3. 專業提供者目錄

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302869

Board Certified Specialty: No

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858)
609-7100

Provider Gender: Male

NPI: 1760845184

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

JIN, MAN

Provider ID: 299955

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073010120

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

KHATIB, NORA

Provider ID: 305375

Board Certified Specialty: No

4060 4TH AVE STE 640
SAN DIEGO, CA 92103

Phone: (619) 642-2240

Fax: (619) 642-2245

After Hours Phone: (619)
642-2240

Provider Gender: Female

NPI: 1538487756

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

KLINE, LANNING

Provider ID: 239915

Board Certified Specialty: No

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841227477

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

LI, ALEXANDRIA

Provider ID: 272833

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1841652864

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


LIU, YUNXIANG

Provider ID: 210803

Board Certified Specialty: No

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1770849804

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

MOLL, ANGELA


Provider ID: 205510

Board Certified Specialty: No

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1861648602


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216412

Board Certified Specialty: No

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

D3. 專業提供者目錄

Provider ID: 205888

Board Certified Specialty: No

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 305445

Board Certified Specialty: No

10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 752-4383

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y
Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 287883

Board Certified Specialty: No

10737 CAMINO RUIZ
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y
Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL

Website: N/A

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295646

Board Certified Specialty: No

10737 CAMINO RUIZ
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y
Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 302925

Board Certified Specialty: No

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)
283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295647

Board Certified Specialty: No

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)
283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299964

Board Certified Specialty: No

4060 4TH AVE STE 610

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427102979

Provider English Spoken: Y

Provider Language(s)

Spoken: French, German,
Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

RAHMATNEJAD, KAMRAN

Provider ID: 300040

Board Certified Specialty: No

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699268292

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. 專業提供者目錄

OPHTHALMOLOGY

SATTERFIELD, KELLIE

Provider ID: 305302

Board Certified Specialty: No

5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121

Phone: (800) 765-2737

Fax: (619) 291-6577

After Hours Phone: (800) 765-2737

Provider Gender: Female

NPI: 1629509336

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305305

Board Certified Specialty: No

5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121

Phone: (858) 450-1010

Fax: (858) 450-9451

After Hours Phone: (858) 450-1010

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299936

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305306

Board Certified Specialty: No

3939 3RD AVE
SAN DIEGO, CA 92103

Phone: (800) 765-2737

Fax: (619) 291-6577

After Hours Phone: (800) 765-2737

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302872

Board Certified Specialty: No

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858) 609-7100

Provider Gender: Male

NPI: 1437689536

Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, RADY CHILDRENS

D3. 專業提供者目錄

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Provider ID: 268723

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


YAMADA, KENTARO

Provider ID: 295848

Board Certified Specialty: No

 1040 UNIVERSITY AVE STE
B209A

SAN DIEGO, CA 92103


 Phone: (619) 299-1100

Fax: (619) 299-7156

 After Hours Phone: (619)
299-1100

Provider Gender: Male

NPI: 1629047188

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Board Certified Specialty: No

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115


 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 296795

Board Certified Specialty: No

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111


 Phone: (800) 898-2020


Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268718

Board Certified Specialty: No

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM

 Website: N/A

D3. 專業提供者目錄


OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304155

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304156

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

OPTOMETRIST

KIM, PHILIP


Provider ID: 287910

Board Certified Specialty: No

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103


 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1740274372

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

SCHWAB, GARY

Provider ID: 290410

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1740274372

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

VO, ANDREW


Provider ID: 304147

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565








 Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OPTOMETRIST






VO, ANDREW

Provider ID: 201312
Board Certified Specialty: No
 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103
 *Phone: (619) 543-7907*
 *After Hours Phone: (619) 543-7907*
Provider Gender: Male
NPI: 1790291565
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OPTOMETRIST

YU, CAROL

Provider ID: 301680
Board Certified Specialty: No
 200 W ARBOR DR

SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1639697451
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OPTOMETRIST

YU, CAROL

Provider ID: 301683
Board Certified Specialty: No
 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1639697451
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1639697451
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

ORAL MAXILLOFACIAL

SURGEON


DENTICO-OLIN, MARC


Provider ID: 304727
Board Certified Specialty: No
 2878 CAMINO DEL RIO S
STE 210
SAN DIEGO, CA 92108
 *Phone: (619) 298-2200*
Fax: (619) 298-2250
 *After Hours Phone: (619) 298-2200*
Provider Gender: Male
NPI: 1629205174
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ORAL MAXILLOFACIAL

SURGEON


DENTICO-OLIN, MARC

Provider ID: 273663

Board Certified Specialty: No

 501 WASHINGTON ST STE
710

SAN DIEGO, CA 92103

 Phone: (619) 295-6774

Fax: (619) 295-6776

 After Hours Phone: (619)
295-6774

Provider Gender: Male

NPI: 1629205174

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN


HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

BLISS, MORGAN


Provider ID: 272565

Board Certified Specialty: Yes

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


BRUMUND, KEVIN

Provider ID: 299635

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299634

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299461

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

D3. 專業提供者目錄

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299462

Board Certified Specialty: No

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299457

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 205628

Board Certified Specialty: No

📍 3030 CHILDRENS WAY STE
109
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

☎ After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1154492916

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7701

Fax: (858) 966-8038

☎ After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1154492916

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299583

D3. 專業提供者目錄

Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299579

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6631

Fax: (619) 471-0656

After Hours Phone: (619) 543-6631

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299582

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299567

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299569

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

D3. 專業提供者目錄

DECONDE, ADAM

Provider ID: 299568

Board Certified Specialty: No

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299531

Board Certified Specialty: No

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299532

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299530

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,

D3. 專業提供者目錄

CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 272604

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858) 309-7701

Provider Gender: Female

NPI: 1952740177


 Provider English Spoken: Y Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299560

Board Certified Specialty: No

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299561

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299559

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298396

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

D3. 專業提供者目錄

926-8273
Provider Gender: Female
NPI: 1144583931
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY **GREENE, JACQUELINE**

Provider ID: 298397
Board Certified Specialty: No
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY **GREENE, JACQUELINE**

Provider ID: 272959
Board Certified Specialty: No
 200 W ARBOR DR

SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1144583931
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY **HARRIS, JEFFREY**

Provider ID: 299576
Board Certified Specialty: No
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Website: N/A

OTOLARYNGOLOGY **HARRIS, JEFFREY**

Provider ID: 299575
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1417988783
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY **HOM, DAVID**

Provider ID: 299514
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1659305027
 Provider English Spoken: Y
Cultural Competency: N

D3. 專業提供者目錄

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


HOM, DAVID

Provider ID: 299515

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HUSSEMAN, JACOB


Provider ID: 301052

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 272660

D3. 專業提供者目錄

Board Certified Specialty: Yes
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701

Provider Gender: Female
NPI: 1659305753

Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299446

Board Certified Specialty: No

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299443

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6631

After Hours Phone: (619) 543-6631

Provider Gender: Female
NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299445

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD

LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 272637

Board Certified Specialty: No

3030 CHILDRENS WAY FL 1

D3. 專業提供者目錄

SAN DIEGO, CA 92123
☎ Phone: (858) 309-7701
Fax: (858) 966-8038
🕒 After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1124230909
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 272767
Board Certified Specialty: Yes
📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (855) 309-7701
Fax: (858) 966-4062
🕒 After Hours Phone: (855) 309-7701
Provider Gender: Male
NPI: 1891858379
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299481
Board Certified Specialty: No
📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299482
Board Certified Specialty: No
📍 200 W ARBOR DR



SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299480
Board Certified Specialty: No
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299590

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299592

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299591

Board Certified Specialty: No

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN


Provider ID: 299607

Board Certified Specialty: No

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299603


Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (619) 543-6631


Fax: (619) 543-6532

 After Hours Phone: (619) 543-6631

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299606

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY


PATEL, VIJAY

Provider ID: 297037


Board Certified Specialty: No

 3030 CHILDRENS WAY STE
1

SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299508

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299509

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299507

Board Certified Specialty: No

 16950 VIA TAZON


SAN DIEGO, CA 92127

D3. 專業提供者目錄

 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male


NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299641

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299639

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631

 After Hours Phone: (619) 543-6631

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH


Provider ID: 299642

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WEISSBROD, PHILIP


Provider ID: 299615

Board Certified Specialty: No

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1366590853


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

D3. 專業提供者目錄

Provider ID: 299610

Board Certified Specialty: No

📍 200 W ARBOR DR STE 505
SAN DIEGO, CA 92103

☎ Phone: (858) 657-8590

🕒 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1366590853

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299614

Board Certified Specialty: No

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298412

Board Certified Specialty: No

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298414

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1619237260

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413

Board Certified Specialty: No

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female



NPI: 1619237260

☐ Provider English Spoken: Y






☐ Provider Language(s)
Spoken: Chinese

Cultural Competency: N

D3. 專業提供者目錄

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*








PATHOLOGY ANATOMIC CLINICAL

ALLEN, ELIZABETH
Provider ID: 275756
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1174814065
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*








PATHOLOGY ANATOMIC

CLINICAL




BROOME, HELEN
Provider ID: 275720
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1184674145
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PATHOLOGY ANATOMIC





CLINICAL

BROOME, HELEN
Provider ID: 275721
Board Certified Specialty: No
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1184674145
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PATHOLOGY ANATOMIC CLINICAL

BUI, JACK
Provider ID: 247581
Board Certified Specialty: No
 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1942529821






D3. 專業提供者目錄



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 247580
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1942529821
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC **CLINICAL**



QUINTANA, PAULINA

Provider ID: 296765
Board Certified Specialty: No
 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
 Phone: (619) 266-3332
Fax: (619) 266-6000
 After Hours Phone: (619)
266-3332
Provider Gender: Female
NPI: 1164482477

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE
VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PATHOLOGY ANATOMIC **CLINICAL**

ROMA, ANDRES

Provider ID: 275826
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781






 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC **CLINICAL**


SHABAIK, AHMED

Provider ID: 275781
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1679521579
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL): Provider Gender: Female
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PATHOLOGY ANATOMIC


CLINICAL

SONG, WEI

Provider ID: 300001

Board Certified Specialty: No

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male


NPI: 1306164157

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PATHOLOGY ANATOMIC


CLINICAL

STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

NPI: 1942561212


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

PATHOLOGY ANATOMIC


CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1174757181

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL
CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PATHOLOGY ANATOMIC


CLINICAL

WANG, DEHUA

Provider ID: 289153

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 *Phone: (858) 966-6776*


Fax: (858) 966-6707

 *After Hours Phone: (858)
966-6776*

Provider Gender: Female

NPI: 1578790655

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRIC ALLERGY /

IMMUNOLOGY

ALKATIB, RHONDA

Provider ID: 291226

Board Certified Specialty: No

 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108

 *Phone: (619) 286-6687*

Fax: (619) 286-6695

 *After Hours Phone: (619)
286-6687*

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1417363086
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSP MED CTR, ALVARADO
HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN

Provider ID: 206083
Board Certified Specialty: No
 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858)
966-5961
Provider Gender: Female
NPI: 1205128089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB

Provider ID: 205824
Board Certified Specialty: No
 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858)
966-5961

Provider Gender: Male
NPI: 1356570758
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB

Provider ID: 205823
Board Certified Specialty: No
 5776 RUFFIN RD

SAN DIEGO, CA 92123
 Phone: (858) 292-1144
 After Hours Phone: (858)
292-1144

Provider Gender: Male
NPI: 1356570758
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205697
Board Certified Specialty: No
 5776 RUFFIN RD
SAN DIEGO, CA 92123
 Phone: (858) 966-4900
 After Hours Phone: (858)
966-4900
Provider Gender: Male
NPI: 1609801299
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, German,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY

Provider ID: 205724

Board Certified Specialty: No

 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1861666919


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY

Provider ID: 205725

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858)
966-5961

Provider Gender: Male

NPI: 1861666919

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

BOCK, MATTHEW

Provider ID: 280463

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1356514624

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR,
LOMA LINDA UNIVERSITY


CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284120

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123



 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1114277787

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

PEDIATRIC CARDIOLOGY

CHAU, PETER

Provider ID: 271427

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1407146947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY

CHILDRENS HOSPITAL, LOMA

LINDA UNIVERSITY MED CTR,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: N/A

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1760691950

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DO, THOMAS

Provider ID: 206162

Board Certified Specialty: No

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 366-5855

Fax: (858) 966-7423

After Hours Phone: (858)
366-5855

Provider Gender: Male

NPI: 1053545376

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
AT MISSION, CHILDRENS
HOSPITAL OF ORANGE
COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 260595

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1780642280

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

D3. 專業提供者目錄

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1962974956

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1669480083

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
SANTA MONICA UCLA MED
CTR, SAN ANTONIO COMM
HOSP, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Fax: (858) 966-7903

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1023329885

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

☎ After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1518036821

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

LEHNERT SCHUCHARDT, ELEANOR

Provider ID: 262250

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

☎ After Hours Phone: (858) 966-5855

Provider Gender: Female

NPI: 1760707210

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. 專業提供者目錄

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL


Provider ID: 206147

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-4912

Fax: (858) 966-7903

 After Hours Phone: (858)
966-4912

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


MUELLER, DANA

Provider ID: 245535

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1184915712

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1376705707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1063452779

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

SAH, SERENA

Provider ID: 206215

Board Certified Specialty: No

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-5855


Fax: (858) 966-7423

 After Hours Phone: (858)
966-5855

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1295042653

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY


STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1538279484

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC CARDIOLOGY

STRINGER, JESSE

Provider ID: 206296

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1972745388

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

Fax: (858) 966-7423

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1891004461

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

VELLORE GOVARDHAN,

D3. 專業提供者目錄

SHILPA

Provider ID: 271454

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1477702165

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified Specialty: No

📍 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7423

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1831423250

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC CARDIOLOGY

YUNOSZAI, ADEL

Provider ID: 303133

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5855

Fax: (858) 966-7903

🕒 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1952493819

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC DERMATOLOGY

BOIKO, SUSAN

Provider ID: 303684

Board Certified Specialty: No

📍 7910 FROST ST STE 120
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6795

Fax: (858) 966-7479

🕒 After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1053488981

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 303679

Board Certified Specialty: No

 7910 FROST ST STE 120
SAN DIEGO, CA 92123

 Phone: (858) 966-6795

Fax: (858) 966-7479

 After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 283142

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6795

Fax: (858) 966-7479

 After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE

AGHILI, ROXANA

Provider ID: 303780

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi
Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


AGHILI, ROXANA

Provider ID: 304918

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi
Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


AMIRNOVIN, RAMBOD

Provider ID: 297673

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629104492

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, LONG BEACH
MEMORIAL MED CTR, EARL
AND LORRAINE MILLER
CHILDRENS HSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

AUSTIN PAGE, LUKAS

Provider ID: 205589

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1326301862

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205601

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105


 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1700926698

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BETTY, MARYANN

Provider ID: 245754

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1285014498

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes



Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


BETTY, MARYANN

Provider ID: 257396

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1285014498


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1609281450

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


BRYL, AMY

Provider ID: 205967

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1497079487

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


CAMPBELL, SARA

Provider ID: 206335

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1841687563

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

D3. 專業提供者目錄

CHOO, SUN

Provider ID: 296535

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296536

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1700047628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER

Provider ID: 205960

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1205813409

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SHARP CHULA

VISTA MED CTR, UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEL RE, ANGELO

Provider ID: 206081

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1275761371

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE

D3. 專業提供者目錄

Provider ID: 288572

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366622078

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE

Provider ID: 287393

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1750513644

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Martin
Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY

Provider ID: 205375

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1740571165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DORWART, ELIZABETH

Provider ID: 294260

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1609132034

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

EKPENYONG, ATIM

Provider ID: 205722

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700




After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1932318565








Provider English Spoken: Y

D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*








PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY

Provider ID: 295690
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Male
NPI: 1629118518
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*





PEDIATRIC EMERGENCY MEDICINE




GAHM, CLAIRE

Provider ID: 301305
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1750709077
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE








GIBONEY, JENNIFER

Provider ID: 205925
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1275895849
 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275784
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105
 *Phone: (619) 280-2058*
Fax: (858) 633-4682
 *After Hours Phone: (619) 280-2058*
Provider Gender: Female
NPI: 1316162324
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM SA 8:00AM-2:00PM*
 *Website: N/A*

D3. 專業提供者目錄

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No

📍 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

🕒 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297174

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1942223664

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

HERSKOVITZ, SCOTT

Provider ID: 261045

Board Certified Specialty: Yes

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1225393499

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

HUNTER, WENDY

Provider ID: 206278

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1053515551

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

INDRA, SEAN

Provider ID: 302625

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

🕒 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1427349091

D3. 專業提供者目錄

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

ISHIMINE, PAUL

Provider ID: 206236
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Male
NPI: 1437184421

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

JACKSON, TAYLOR

Provider ID: 302127
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 966-8519
 After Hours Phone: (858)
966-5999
Provider Gender: Male
NPI: 1326543752

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA

Provider ID: 262232
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1376862177

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA

Provider ID: 262234
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905
Provider Gender: Female
NPI: 1376862177

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

KHAN, SHAHFAR

Provider ID: 294094

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1013361815

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302317

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1609495399

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206107

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL

OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 262029

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL

OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

D3. 專業提供者目錄

Provider ID: 248071

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366761959

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295668

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN

Provider ID: 275654

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1528483955

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY

Provider ID: 205348

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1073740205

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302146


Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)






D3. 專業提供者目錄




966-8800
Provider Gender: Male
NPI: 1194145946
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MINKA, GENEVIEVE








Provider ID: 262107
Board Certified Specialty: No
 8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123
 Phone: (858) 966-7785
 After Hours Phone: (858)
966-7785
Provider Gender: Female
NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


MINKA, GENEVIEVE

Provider ID: 205334
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MINKA, GENEVIEVE





Provider ID: 205336
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905
Provider Gender: Female
NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

MISHRA-OCCHINO, SEEMA

Provider ID: 205404
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700
Provider Gender: Female
NPI: 1689612830
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


MONTBLEAU, KARA

Provider ID: 299240

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1164981197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


MURRAY, MATTHEW

Provider ID: 205759

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1215103023

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


NGUYEN, MYLINH

Provider ID: 262299

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1730428053

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY


MEDICINE


NGUYEN, MARGARET

Provider ID: 270705

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1942485248

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

D3. 專業提供者目錄

OZAKI, YOSHIHIRO

Provider ID: 241926

Board Certified Specialty: No

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Male

NPI: 1467898239

Provider English Spoken: Y

Provider Language(s)

Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: VALLEY

CHILDRENS HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

OZCAN, ALI

Provider ID: 287923

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1265867683

Provider English Spoken: Y

Provider Language(s)

Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, LOMA LINDA

UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PADE, KATHRYN

Provider ID: 262411

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1215375183

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Stanford

Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302352

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1710418744

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD

Provider ID: 295457

Board Certified Specialty: No







4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905





Fax: (619) 283-1614




D3. 專業提供者目錄

 After Hours Phone: (619) 280-2905
Provider Gender: Male
NPI: 1881695914
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE








PARKER, SHERINE

Provider ID: 205784
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1477626513
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE









QUINONES-PEREZ, BIANCA

Provider ID: 206947
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206949
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216970
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female

D3. 專業提供者目錄

NPI: 1740468057


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


RATNAYAKE, KRISTIN


Provider ID: 206034

Board Certified Specialty: No

 3020 CHILDRENS WAY MC
5075

SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1679716658

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


RUIZ, MONICA

Provider ID: 305340

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1982059689

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


RUSSELL, SAMUEL


Provider ID: 301250

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

 Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1215564265

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


RUSSELL, SAMUEL

Provider ID: 301249

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1215564265

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SALEH, FAREED

Provider ID: 206216

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1366691115

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SANACORA, RACHEL


Provider ID: 297728

Board Certified Specialty: No

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1548987985

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


SANACORA, RACHEL

Provider ID: 297729

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1548987985

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


SCHROTER, STEPHANIE

Provider ID: 243830

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1073951828

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHWARTZ, KRISTY

Provider ID: 206169

Board Certified Specialty: No





 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


D3. 專業提供者目錄

 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1497080808
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SHERER, KIMBERLY

Provider ID: 284168
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1992202964
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A




PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA

Provider ID: 248171
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1336503234
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE






SOUDER, CHRISTOPHER

Provider ID: 301636
Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)



966-8800
Provider Gender: Male
NPI: 1851540199
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER




Provider ID: 301635
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1851540199
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TAMAS, VANESSA




Provider ID: 206212
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700

Provider Gender: Female
NPI: 1326225368
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 294677
Board Certified Specialty: No




 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1184071516
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE








TODD, SARAH

Provider ID: 302800
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905
Provider Gender: Female
NPI: 1407299787
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TRAN, THERESA

Provider ID: 301834
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1417496985
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

D3. 專業提供者目錄


PEDIATRIC EMERGENCY MEDICINE


TRAUT, JOEL

Provider ID: 205475

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Male

NPI: 1982792065


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


ULRICH, STACEY

Provider ID: 205847

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8036

 After Hours Phone: (858)
966-8036

Provider Gender: Female

NPI: 1619049236

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


VAIDYA, KAMALA

Provider ID: 205809

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


VAIDYA, KAMALA


Provider ID: 205811

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

 Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


VAN WOY, LAUREN

Provider ID: 301574

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800



 After Hours Phone: (858)
966-8800

Provider Gender: Female








NPI: 1568959161

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish





D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*




PEDIATRIC EMERGENCY MEDICINE





VANE, JACKSON
Provider ID: 205883
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Male
NPI: 1952608580
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY






MEDICINE
VARGAS, JACLYN
Provider ID: 285935
Board Certified Specialty: No
 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 576-1700*
Fax: (858) 966-8479
 *After Hours Phone: (858) 576-1700*
Provider Gender: Female
NPI: 1619359718
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN
Provider ID: 285934
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5841*
Fax: (858) 966-6728
 *After Hours Phone: (858) 966-5841*
Provider Gender: Female
NPI: 1619359718

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN
Provider ID: 296486
Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 *Phone: (619) 280-2905*
Fax: (619) 283-1614
 *After Hours Phone: (619) 280-2905*
Provider Gender: Female
NPI: 1619359718
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT*

D3. 專業提供者目錄

PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

VAYNGORTIN, TATYANA

Provider ID: 263012
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1578967907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

WANG, YVETTE

Provider ID: 263416
Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1710321278
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

WANG, EMILY

Provider ID: 265952
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1427142363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

WANG, EMILY

Provider ID: 265954
Board Certified Specialty: No
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905

Provider Gender: Female
NPI: 1427142363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

YAPHOCKUN, KAREN

Provider ID: 206184
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858)
576-1700
Provider Gender: Female
NPI: 1861880817

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

CYBALUK, ANNA

Provider ID: 294214
Board Certified Specialty: No
3030 CHILDRENS WAY STE
4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)
966-4032
Provider Gender: Female

NPI: 1043674849
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY

Provider ID: 206059
Board Certified Specialty: No
3030 CHILDRENS WAY FL
4 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1912112020

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F

8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302818
Board Certified Specialty: No
3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1841721172

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

VARGAS TRUJILLO, MARCELA

Provider ID: 205605
Board Certified Specialty: No
3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-4032
After Hours Phone: (858)
966-4032

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1952534091
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301639
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003

Provider Gender: Male
NPI: 1912369273
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: No

Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

GOYAL, NIDHI

Provider ID: 205598
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003

Provider Gender: Female
NPI: 1598029332
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC GASTROENTEROLOGY

HARTMANN, PHILLIPP
Provider ID: 294228
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003

Provider Gender: Male
NPI: 1356796536
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, German
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A


PEDIATRIC GASTROENTEROLOGY

LIN, TOM

Provider ID: 297707
Board Certified Specialty: No
📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
📞 After Hours Phone: (858)
966-4003
Provider Gender: Male

D3. 專業提供者目錄


NPI: 1114136934


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY


PATHAK, SAGAR

Provider ID: 301825


Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003


Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Male

NPI: 1700318292

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY


SCHWARZ, KATHLEEN

Provider ID: 205885

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1265465918

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC

GASTROENTEROLOGY


YOUNG, JOCELYN

Provider ID: 294675

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UC DAVIS

MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

BRIGGS, BENJAMIN

Provider ID: 274689

Board Certified Specialty: No

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1952695777

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄


*DIEGO, NAVAL MEDICAL CTR
SD RBE*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRIC HEMATOLOGY / ONCOLOGY


BUSH, KELLY

Provider ID: 274408

Board Certified Specialty: No

 *3010 CHILDRENS WAY STE
2*

SAN DIEGO, CA 92123

 *Phone: (858) 966-5811*

Fax: (858) 966-8035

 *After Hours Phone: (858)
966-5811*

Provider Gender: Female

NPI: 1073831079

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRIC HEMATOLOGY /

ONCOLOGY


CHOO, SUN

Provider ID: 206115

Board Certified Specialty: No

 *3010 CHILDRENS WAY STE
2-WEST*

SAN DIEGO, CA 92123

 *Phone: (858) 966-5811*

Fax: (858) 966-8035

 *After Hours Phone: (858)
966-5811*

Provider Gender: Female

NPI: 1700047628

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No

 *3010 CHILDRENS WAY
SAN DIEGO, CA 92123*


 *Phone: (858) 966-5811*

Fax: (858) 966-8035

 *After Hours Phone: (858)
966-5811*

Provider Gender: Female

NPI: 1780813923

 *Provider English Spoken: Y*

Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER

Provider ID: 205769

Board Certified Specialty: No

 *3010 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5811*

Fax: (858) 966-8035

 *After Hours Phone: (858)
966-5811*

Provider Gender: Female

NPI: 1588866115

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. 專業提供者目錄

PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA

Provider ID: 205882

Board Certified Specialty: No

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1982091740

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE

Provider ID: 296760

Board Certified Specialty: No

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1396942470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

KUO, DENNIS

Provider ID: 205433

Board Certified Specialty: No

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1750492146

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA

Provider ID: 302088

Board Certified Specialty: No

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1649707365

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY







WONG, VICTOR

Provider ID: 206149

Board Certified Specialty: No




3010 CHILDRENS WAY
SAN DIEGO, CA 92123

D3. 專業提供者目錄

 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1154692473
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY **YU, HELENA**




Provider ID: 301583
Board Certified Specialty: No
 3010 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1881127736
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY **YU, JENNIFER**




Provider ID: 206148
Board Certified Specialty: No
 3010 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1326315599


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY **ZAGE, PETER**




Provider ID: 206315

Board Certified Specialty: No
 3010 CHILDRENS WAY STE 2W SAN DIEGO, CA 92123
 Phone: (858) 966-5811
Fax: (858) 966-8035
 After Hours Phone: (858) 966-5811

Provider Gender: Male
NPI: 1912003161
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND
Provider ID: 289138
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123
 Phone: (858) 966-7785
Fax: (858) 966-8658
 After Hours Phone: (858) 966-7785
Provider Gender: Male
NPI: 1760460026
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


CARTER, CAITLIN

Provider ID: 302777


Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL 1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1255514618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


INGULLI, ELIZABETH

Provider ID: 302778

Board Certified Specialty: No

 8110 BIRMINGHAM WAY
STE 28

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1811919244

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC NEPHROLOGY


MAK, ROBERT

Provider ID: 302776

Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL 1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858) 966-8052

Provider Gender: Male

NPI: 1740295252

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC NEPHROLOGY


PERENS, ELLIOT

Provider ID: 302765

Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL 1

SAN DIEGO, CA 92123

 Phone: (858) 966-8052

Fax: (858) 966-7789

 After Hours Phone: (858) 966-8052

Provider Gender: Male

NPI: 1922328947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


D3. 專業提供者目錄

OAKLAND, MEDICAL CTR AT
UCSF, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC PULMONOLOGY


AKONG, KATHRYN

Provider ID: 205673

Board Certified Specialty: No

 3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1912169061

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC PULMONOLOGY


BHATTACHARJEE, RAKESH

Provider ID: 205950

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2 NORTH

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY


BHATTACHARJEE, RAKESH

Provider ID: 246060

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Male

NPI: 1588781173

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC PULMONOLOGY

CERNELC KOHAN, MATEJKA

Provider ID: 243042

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1871752451

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S


HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

CERNELC KOHAN, MATEJKA

D3. 專業提供者目錄

Provider ID: 243041

Board Certified Specialty: No

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

CHENG, EULALIA

Provider ID: 205827

Board Certified Specialty: No

3030 CHILDRENS WAY STE
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1750394862

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

FINCH, CHRISTINA

Provider ID: 302581

Board Certified Specialty: No

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1598255325

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY **FIREIZEN, YARON**

Provider ID: 302329

Board Certified Specialty: No

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1699123927

Provider English Spoken: Y
Provider Language(s)
Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY **LANDEO GUTIERREZ, JEREMY**

Provider ID: 284176

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846





Fax: (858) 569-9052

After Hours Phone: (858)
966-5846





Provider Gender: Male




NPI: 1255750360

D3. 專業提供者目錄




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





PEDIATRIC PULMONOLOGY **LANDEO GUTIERREZ, JEREMY**

Provider ID: 284177
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 966-8457
 After Hours Phone: (858)
966-5846
Provider Gender: Male
NPI: 1255750360
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO




Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **LENHART-PENDERGRASS, PATRICIA**






Provider ID: 294641
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 966-8457
 After Hours Phone: (858)
966-5846
Provider Gender: Female
NPI: 1144615659

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RAO, APARNA**



Provider ID: 206124
Board Certified Specialty: No
 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 966-5847
 After Hours Phone: (858)
966-5846
Provider Gender: Female

NPI: 1649222340




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RAO, APARNA**

Provider ID: 206123
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
Fax: (858) 569-9052
 After Hours Phone: (858)
966-5846
Provider Gender: Female
NPI: 1649222340

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

D3. 專業提供者目錄


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PEDIATRIC PULMONOLOGY

RYU, JULIE

Provider ID: 206218

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-5847

 After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1568533321

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC PULMONOLOGY

TANTISIRA, KELAN

Provider ID: 277183

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1760420434

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY


CHANG, JOHANNA

Provider ID: 246394

Board Certified Specialty: No

 3030 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8082

 After Hours Phone: (858) 966-8082

Provider Gender: Female

NPI: 1821242199

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC RHEUMATOLOGY **SHEETS, ROBERT**


Provider ID: 255900

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123



 Phone: (858) 966-8082

Fax: (858) 966-4067

 After Hours Phone: (858) 966-8082

Provider Gender: Male

NPI: 1013088772

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-4:30PM

 Website: N/A


PEDIATRICS

ALAGIRI, MADHU

Provider ID: 206387

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484

Fax: (858) 966-4064


 After Hours Phone: (858)

D3. 專業提供者目錄

966-7484

Provider Gender: Male

NPI: 1619083961

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

ALLSUP, VICTORIA


Provider ID: 302344

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1437786944

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302345

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1437786944

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

ANDREE, GREGOR

Provider ID: 293220

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRICS


ANDREE, GREGOR

Provider ID: 293219

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

BEAUCHAMP WALTERS, JULIA


Provider ID: 270063

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841







D3. 專業提供者目錄

Provider Gender: Female
NPI: 1457420713

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRICS








CAMERON, MELISSA

Provider ID: 205965
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5841
Fax: (858) 966-6728
 After Hours Phone: (858)
966-5841
Provider Gender: Female
NPI: 1902983752
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

 Website: N/A





PEDIATRICS




CANTU, ALICIA

Provider ID: 205752
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1922179688
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS








CANTU, ALICIA

Provider ID: 205753
Board Certified Specialty: No
 3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123
 Phone: (858) 966-8974
Fax: (858) 966-6721
 After Hours Phone: (858)
966-8974
Provider Gender: Female
NPI: 1922179688
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

CHONG, AMY

Provider ID: 259993
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-5803
Fax: (858) 966-5992
 After Hours Phone: (858)
966-5803
Provider Gender: Female
NPI: 1720423288
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

D3. 專業提供者目錄

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293274

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRICS

DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1801099676

Provider English Spoken: Y
Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

DOSHI, AMI

Provider ID: 205330

Board Certified Specialty: No

3030 CHILDRENS WAY STE
300
SAN DIEGO, CA 92123

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1801099676

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296242

Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM


 Website: N/A

PEDIATRICS


GIBONEY, JENNIFER

Provider ID: 296241

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

Provider Gender: Female

NPI: 1275895849

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

 Website: N/A


PEDIATRICS

GRAY, SARAH

Provider ID: 284224

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1508210311

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PEDIATRICS

HUANG, MARIA

Provider ID: 205974

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1770841140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PEDIATRICS

JIMENEZ BACARDI, ADRIA


Provider ID: 294640

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841


Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Male

NPI: 1467847293

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: ST MARYS HOSPITAL AND MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

PEDIATRICS

JINDAL, ANUJA

Provider ID: 303285

Board Certified Specialty: No

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858) 966-5819

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 213847

Board Certified Specialty: No

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844) 200-2426

Provider Gender: Female

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

PEDIATRICS

KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1912345307

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1053672444

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

LOPEZ, XIMENA

Provider ID: 302856

Board Certified Specialty: No

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

Phone: (858) 966-4032


Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1740316405

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MANNINO AVILA, ELIZABETH

Provider ID: 262161

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1164747127

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MARANO, RACHEL

Provider ID: 302438

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1043673528

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
HOLLYWOOD PRESBYTERIAN
MED CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

MARC AURELE, KRISHELLE


Provider ID: 301719

Board Certified Specialty: No

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

NGO, MAI

Provider ID: 302113

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-4051

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1508910787

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Vietnamese
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
MEDICAL CTR AT UCSF, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL): Provider ID: 205865

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

NGO, MAI


Provider ID: 302114

Board Certified Specialty: No

 7910 FROST ST STE 195
SAN DIEGO, CA 92123


 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1508910787

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSF


BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
MEDICAL CTR AT UCSF, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS


PATEL, AARTI

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1871813105

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1699955542

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


POLICH, MICHELLE

Provider ID: 286390

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1780118018

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRICS

RHEE, KYUNG

Provider ID: 206114

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

D3. 專業提供者目錄

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1013996529


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


RIES, DAVID

Provider ID: 206082

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Male

NPI: 1376705483

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


RUNGVIVATJARUS, TIRANUN

Provider ID: 206319

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1407276363


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1881893477

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR

MEDICAL CENTER,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS


STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1659442317

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

D3. 專業提供者目錄


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721

Board Certified Specialty: No

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PEDIATRICS

VEGA, SARAH

Provider ID: 297077

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700
Fax: (858) 966-6728

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS


VEGA, SARAH

Provider ID: 297078

Board Certified Specialty: No

 3665 KEARNY VILLA RD
STE 500

SAN DIEGO, CA 92123

 Phone: (858) 966-5980
Fax: (858) 966-5992

 After Hours Phone: (858)
966-5980

Provider Gender: Female

NPI: 1154716199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

D3. 專業提供者目錄

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


ALGRA, JEFFREY

Provider ID: 287524

Board Certified Specialty: No

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION

BIFFL, SUSAN

Provider ID: 287453

Board Certified Specialty: No

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


DALAL, PRITHA

Provider ID: 287523

Board Certified Specialty: No

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


LEE, HAEWON

Provider ID: 256226

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-8200

 After Hours Phone: (858)
657-8200

Provider Gender: Female

NPI: 1447661657

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

D3. 專業提供者目錄

Provider ID: 295276
Board Certified Specialty: No
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1407052459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 287520

Board Certified Specialty: No

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 287519

Board Certified Specialty: No

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1336356203

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No

7910 FROST ST STE 195
SAN DIEGO, CA 92123

Phone: (858) 966-8974

After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA

D3. 專業提供者目錄


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY

Provider ID: 284763

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 923-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
923-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300092

Board Certified Specialty: No

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Female

NPI: 1477129302

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No

 6719 ALVARADO RD STE
308

 SAN DIEGO, CA 92120
Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619)
265-7912

Provider Gender: Female

NPI: 1558300665

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, PALOMAR

MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL,


GROSSMONT HOSPITAL,


SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217649

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


BRUECKNER, TAMMIE

Provider ID: 255558

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


CASTILLO, PATRICIA

Provider ID: 257530

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

Provider Gender: Female

NPI: 1376550657


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5:00PM

 Website: N/A



PHYSICIANS ASSISTANT

DERISSI, DANA

Provider ID: 301632

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1063829505

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

PHYSICIANS ASSISTANT


DOUGHERTY, CLARA

Provider ID: 301589


Board Certified Specialty: No

 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123

 Phone: (858) 430-1101

Fax: (858) 429-7931

 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PHYSICIANS ASSISTANT

DOUGHERTY, CLARA

Provider ID: 301588

Board Certified Specialty: No

 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123


 Phone: (858) 429-7646


Fax: (858) 429-7646

 After Hours Phone: (858)
429-7646

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

DOUGHERTY, CLARA


Provider ID: 301586

Board Certified Specialty: No

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103


 Phone: (619) 297-4707

Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT

DOUGHERTY, CLARA


Provider ID: 301591

Board Certified Specialty: No

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Female

NPI: 1609987619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

GUTH, CARA


Provider ID: 299111

Board Certified Specialty: No

 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121


 Phone: (858) 455-6460

Fax: (858) 455-5362

 After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1992177182

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No

203 W F ST
SAN DIEGO, CA 92101

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298430

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765



Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298428

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


KIVIAT, ANNETTE

Provider ID: 302452


Board Certified Specialty: No

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT


LAM, DAVINA

Provider ID: 295651

Board Certified Specialty: No

 6719 ALVARADO RD STE 308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619) 265-7912

Provider Gender: Female

NPI: 1245863737

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL,

ALVARADO HOSP MED CTR,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


LAMBERT, GAGE


Provider ID: 214788

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1144672494

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

LINDEMANN, CHRISTINA

Provider ID: 283760

Board Certified Specialty: No

 4510 EXECUTIVE DR STE 325

D3. 專業提供者目錄

SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (858) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194373514
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305026
Board Certified Specialty: No
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093440836
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280611
Board Certified Specialty: No
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1104371251
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258040
Board Certified Specialty: No
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386032308
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

NAKAMITSU, ABIGAIL

Provider ID: 268666
Board Certified Specialty: No
📄 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
☎ Phone: (858) 966-6789
Fax: (858) 966-8519
🕒 After Hours Phone: (858) 966-6789
Provider Gender: Female
NPI: 1932459179
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293441
Board Certified Specialty: No
📄 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8275
Fax: (888) 539-8783

D3. 專業提供者目錄

 After Hours Phone: (800)
926-8275

Provider Gender: Male


NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PELIO, DARREN


Provider ID: 293444

Board Certified Specialty: No

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

 Phone: (800) 926-8278

Fax: (888) 539-8786

 After Hours Phone: (800)
926-8278

Provider Gender: Male

NPI: 1386791028


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

PERREAULT, MARK


Provider ID: 283586

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283585

Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293247

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1639528110

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1639528110

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1225581754

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT


PYLE, ALEXANDRA

Provider ID: 297718

Board Certified Specialty: No

 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121


 *Phone: (858) 455-6460*

Fax: (858) 455-7197

 *After Hours Phone: (858) 455-6460*

Provider Gender: Female

NPI: 1225416472

 *Provider English Spoken: Y*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 20\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:30AM-4:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT


ROBERTS, AUDREY

Provider ID: 253253

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (619) 543-7777*

 *After Hours Phone: (619) 543-7777*

Provider Gender: Female

NPI: 1265960256

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT


SCHMITT, EVA

Provider ID: 264176

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858) 966-8800*

Provider Gender: Female

NPI: 1174715106

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: German*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256639

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (858) 453-1469

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1780851253

 *Provider English Spoken: Y*

Cultural Competency: N


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1316102163

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


SCHROEDER, JENNIFER

Provider ID: 256640

Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1336659507

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316102163


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1124593926

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No

 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1972595478

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


SPEH, BRIAN


Provider ID: 305009

Board Certified Specialty: No

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1972595478

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT


STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (619) 543-7496

 After Hours Phone: (619)
543-7496

Provider Gender: Female

NPI: 1972595478


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1972595478

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372

D3. 專業提供者目錄

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

WEBB, SHANNON

Provider ID: 305285

Board Certified Specialty: No

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Phone: (858) 750-2983

Fax: (858) 750-2984

After Hours Phone: (858)
750-2983

Provider Gender: Female

NPI: 1821271685

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278203

Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

D3. 專業提供者目錄

Provider Gender: Female
NPI: 1932494499
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT **WEIR, JACQUELINE**

Provider ID: 278201
Board Certified Specialty: No
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 925-8271
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
925-8271
Provider Gender: Female
NPI: 1932494499
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT **WEIR, JACQUELINE**

Provider ID: 278200
Board Certified Specialty: No
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932494499

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT **WRIGHT, DEREK**



Provider ID: 302388
Board Certified Specialty: No
📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

☎ Phone: (619) 325-1161
Fax: (619) 325-1717
🕒 After Hours Phone: (619)
325-1161
Provider Gender: Male
NPI: 1629674858
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PREVENTATIVE MEDICINE **GENERAL**




ROMERO, CAMILA
Provider ID: 293289
Board Certified Specialty: No
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1508912130
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

D3. 專業提供者目錄



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PREVENTATIVE MEDICINE **GENERAL**

ROMERO, CAMILA

Provider ID: 293290
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*
Provider Gender: Female
NPI: 1508912130



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PREVENTATIVE MEDICINE **GENERAL**

ROMERO, CAMILA

Provider ID: 303060
Board Certified Specialty: No
 330 LEWIS ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*


926-8273
Provider Gender: Female
NPI: 1508912130
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Spanish*
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 293400
Board Certified Specialty: No
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*


Provider Gender: Female
NPI: 1932292422
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM SA 8:30AM-4:00PM*
 *Website: N/A*

PSYCHOLOGIST

ABERCROMBIE, SHERI




Provider ID: 290770
Board Certified Specialty: No
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8787*
Fax: (858) 987-5825
 *After Hours Phone: (858) 810-8787*


Provider Gender: Female
NPI: 1932292422
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

PSYCHOLOGIST


BANKS, SARAH

Provider ID: 203174
Board Certified Specialty: No
 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1164701132
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):  After Hours Phone: (800) 926-8273

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


BANKS, SARAH

Provider ID: 203173

Board Certified Specialty: No

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

BASS, GURGIANA

Provider ID: 290752

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8787

Fax: (858) 987-5825

 After Hours Phone: (858) 810-8787

Provider Gender: Male

NPI: 1639325277


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273811

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 290745

Board Certified Specialty: No

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619) 234-2158

Provider Gender: Male

NPI: 1235364712

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

DEL AGUILA, FABIOLA

Provider ID: 290302

Board Certified Specialty: No

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1720283211

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

DIOKNO, RHODA

Provider ID: 290800

Board Certified Specialty: No

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1629109483


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290954

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1114687803


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290773

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700


Provider Gender: Female
NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 961-1497

Fax: (858) 633-4682

 After Hours Phone: (619)
961-1497

Provider Gender: Female


NPI: 1902939630

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

GIAMONA, KRISTEN

Provider ID: 294171

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

D3. 專業提供者目錄

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1376824383

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

GIAMONA, KRISTEN

Provider ID: 290801

Board Certified Specialty: No

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8787

Fax: (858) 987-5825

☎ After Hours Phone: (858) 810-8787

Provider Gender: Female

NPI: 1376824383

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

GOMEZ, JUANITA

Provider ID: 291424

Board Certified Specialty: No

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130

☎ Phone: (800) 926-8372

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8372

Provider Gender: Female

NPI: 1790915759

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 296237

Board Certified Specialty: No

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1902125818

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 290792

Board Certified Specialty: No

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 279-0377

☎ After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1902125818

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

LABIB, MICHAEL

Provider ID: 301617

Board Certified Specialty: No

📍 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 785-3384

☎ After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1609055797

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Arabic

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST


LEBENSOHN CHIALVO, FLORENCIA


Provider ID: 245225
Board Certified Specialty: No
 7910 FROST ST STE 350
SAN DIEGO, CA 92123
 Phone: (858) 496-4800
 After Hours Phone: (858)
496-4800

Provider Gender: Female
NPI: 1134788730

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224
Board Certified Specialty: No
 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1134788730
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273638
Board Certified Specialty: No
 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273



Provider Gender: Female
NPI: 1487026415

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273639
Board Certified Specialty: No
 4910 DIRECTORS PL STE
250
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1487026415

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

MAGINOT-CHESSER, TAMARA

Provider ID: 273223
Board Certified Specialty: No
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
Fax: (858) 534-6727

D3. 專業提供者目錄

☎ After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1043441165

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No

📍 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

☎ Phone: (619) 662-4100

Fax: (619) 205-1949

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528306206

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

MONTOYA, JESSICA

Provider ID: 274619

Board Certified Specialty: No

📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003421256

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 296219

Board Certified Specialty: No

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1598911315

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1598911315

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869

Board Certified Specialty: No

D3. 專業提供者目錄

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


NORMAN, MARC

Provider ID: 272916

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-2827

 After Hours Phone: (619)
543-2827

Provider Gender: Male

NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


ORFF, HENRY


Provider ID: 273009

Board Certified Specialty: No

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (844) 757-5337

 After Hours Phone: (844)
757-5337

Provider Gender: Male

NPI: 1144685215

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

ORTIZ, MARIA


Provider ID: 290721

Board Certified Specialty: No

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497980775

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

PATTERSON-HYATT, KIMBERLY

Provider ID: 290730

Board Certified Specialty: No

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1780997742


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

PRINCE, RENEE


Provider ID: 303603


Board Certified Specialty: No

D3. 專業提供者目錄

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female


NPI: 1467737908


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


PSYCHOLOGIST


RADOJEVIC, NATASHA

Provider ID: 290690

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 Fax: (858) 279-0377

 After Hours Phone: (858)
810-8700

Provider Gender: Female


NPI: 1821365008


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


SCHELLINGER, KRISTON


Provider ID: 213750

Board Certified Specialty: No

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


SCHELLINGER, KRISTON


Provider ID: 213751

Board Certified Specialty: No

 9909 MIRA MESA BLVD
STE 200


SAN DIEGO, CA 92131

 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


SCHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1659920403

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290283

Board Certified Specialty: No

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1255696183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN


Provider ID: 290285

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290284

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

VANFOSSEN, BRIAN

Provider ID: 295382

Board Certified Specialty: No

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1396072500


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


VIERLING, SABRINA

Provider ID: 290589

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)

D3. 專業提供者目錄

280-2058
Provider Gender: Female
NPI: 1215288238
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299924
Board Certified Specialty: No
📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598150039
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299923
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598150039
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238062
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1023436417
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

8:00AM-5:00PM
🌐 Website: N/A

PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238061
Board Certified Specialty: No
📍 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1023436417
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PULMONARY DISEASES

LE, HUAN

Provider ID: 300636
Board Certified Specialty: No
📍 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
☎ Phone: (619) 582-1448
Fax: (619) 582-1081

D3. 專業提供者目錄

☎ After Hours Phone: (619) 582-1448

Provider Gender: Male

NPI: 1780797381

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: French, Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-W

9:00AM-5:00PM

TH 8:00AM-1:00PM

F 9:00AM-5:00PM

SA 8:00AM-11:00AM

🌐 Website: N/A

PULMONARY DISEASES

LE, HUAN

Provider ID: 27358

Board Certified Specialty: No

📍 5507 EL CAJON BLVD STE
C

SAN DIEGO, CA 92115

☎ Phone: (619) 582-1448

Fax: (619) 582-1081

☎ After Hours Phone: (619)
582-1448

Provider Gender: Male

NPI: 1780797381

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: French, Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\99

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-W

9:00AM-5:00PM

TH 8:00AM-1:00PM

F 9:00AM-6:00PM

SA 8:00AM-11:00AM

🌐 Website: N/A

PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299986

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300055

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100

Board Certified Specialty: No

📍 7901 FROST ST

SAN DIEGO, CA 92123

☎ Phone: (858) 939-5010


Fax: (619) 740-8499

☎ After Hours Phone: (858)
939-5010

Provider Gender: Male

D3. 專業提供者目錄


NPI: 1275929242


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIATION ONCOLOGY

COLEMAN, LORI


Provider ID: 221091

Board Certified Specialty: No

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123


 Phone: (858) 939-5010

Fax: (858) 939-5021

 After Hours Phone: (858)
939-5010

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,


Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


HATTANGADI GLUTH, JONA

Provider ID: 262270

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127


 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-5:00PM

F 8:00AM-8:00PM

 Website: N/A

RADIATION ONCOLOGY


HATTANGADI GLUTH, JONA

Provider ID: 254496

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

 Website: N/A

RADIATION ONCOLOGY


HOOPES, DAVID

Provider ID: 262206

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


HOOPES, DAVID

Provider ID: 269725

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127


 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


MURPHY, JAMES

Provider ID: 262401

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127


 Phone: (559) 447-4949

Fax: (559) 447-4925

 After Hours Phone: (559)
447-4949

Provider Gender: Male

NPI: 1730382631

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221105

Board Certified Specialty: No

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123


 Phone: (858) 939-5010

Fax: (858) 939-5021

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIATION ONCOLOGY

WEINSTEIN, GEOFFREY

Provider ID: 220039

Board Certified Specialty: No

 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 939-5010


Fax: (858) 939-5021

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1841233947

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,


SHARP MEMORIAL HOSPITAL,


SHARP CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 304163

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

🗃 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269318

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

🗃 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 283675

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

🗃 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

BRANCH, CODY

Provider ID: 304199

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851770622

🗃 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE

Provider ID: 304194

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (858) 554-1212

Fax: (858) 795-1195

🕒 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1619156635

🗃 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE


Provider ID: 303054

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858) 554-1212*

Provider Gender: Female

NPI: 1619156635

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

CARSWELL, AIMEE


Provider ID: 303055

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858) 554-1212*

Provider Gender: Female

NPI: 1619156635

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1427430511

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228

Board Certified Specialty: No

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1427430511

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1427430511

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

D3. 專業提供者目錄

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH

Provider ID: 301914

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8863

Fax: (858) 966-8863

 After Hours Phone: (858)
966-8863

Provider Gender: Male

NPI: 1083872212

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299991

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299992

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,

Providence Mission Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. 專業提供者目錄

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1497721724

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201289

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1255457941

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201291

Board Certified Specialty: No

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1255457941

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271567

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1720465396

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

Stanford Health Care,

STANFORD HEALTH CARE

TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **GRISSOM, MURRAY**

Provider ID: 271569
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1720465396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
Stanford Health Care,
STANFORD HEALTH CARE
TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**

Provider ID: 282789
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1992120026
Provider English Spoken: Y
Provider Language(s)
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**

Provider ID: 282791
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1992120026
Provider English Spoken: Y
Provider Language(s)
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **HORKY, LAURA**

Provider ID: 241853
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1598967812
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC **JAFFRAY, PAUL**

Provider ID: 299957
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273

D3. 專業提供者目錄

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Los Angeles


General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299958

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Los Angeles


General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 304165

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los Angeles

General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271126

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271127

D3. 專業提供者目錄

Board Certified Specialty: No

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283145

Board Certified Specialty: No

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300065

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300064

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. 專業提供者目錄

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300031

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300032

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299968

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 299969

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 304202

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344

Board Certified Specialty: No

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


D3. 專業提供者目錄


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


SCHULTZ, HEATHER

Provider ID: 240342

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299948

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299949

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283310

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312

Board Certified Specialty: No

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. 專業提供者目錄

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303049

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303048

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


STRAKA, CHRISTOPHER

Provider ID: 276875

Board Certified Specialty: No

 16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127



 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1801281399

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 17\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


SWEET, JASON

Provider ID: 305028

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1326197393

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL

Provider ID: 240408

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1386987261


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 304179

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240405

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240407

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268546

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 304175

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299988

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

THOMPSON, COLE

Provider ID: 299989

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1700315264

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300035

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

Board Certified Specialty: No

200 W ARBOR DR

D3. 專業提供者目錄

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285165183

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDOT, NOUSHIN

Provider ID: 300071

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396700852

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDOT, NOUSHIN

Provider ID: 300070

Board Certified Specialty: No

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396700852

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283207

Board Certified Specialty: No

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

☎ Phone: (858) 505-4100

☎ Fax: (858) 429-7939

🕒 After Hours Phone: (858) 505-4100

Provider Gender: Male

NPI: 1427456151

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283205

Board Certified Specialty: No

📍 3366 5TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 230-0400

☎ Fax: (858) 429-7938

🕒 After Hours Phone: (619) 230-0400

Provider Gender: Male

NPI: 1427456151

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283517

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790146611

🗉 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):  After Hours Phone: (800) 926-8273

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283519

Board Certified Specialty: No

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1790146611


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No

 9333 GENESEE AVE STE
310

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

Provider Gender: Male

NPI: 1982120861

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL

THERAPIST


AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982120861


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL **THERAPIST**

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1669818993

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL **THERAPIST**

BARTZ, BRYAN

Provider ID: 273380

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1669818993


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST


BERGERON, PATRICK

Provider ID: 206534

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

CORTEZ, AARON

Provider ID: 279194

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1639693187

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

D3. 專業提供者目錄

COSTELLO, MARK

Provider ID: 295634

Board Certified Specialty: No

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Phone: (858) 277-2277

Fax: (408) 945-4018

After Hours Phone: (858)
277-2277

Provider Gender: Male

NPI: 1710193602

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Armenian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL

THERAPIST

DANG, KAYLEE

Provider ID: 279261

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1316426356

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

DANG, ERIC

Provider ID: 258363

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (858) 543-3333

Fax: (858) 657-1809

After Hours Phone: (858)
543-3333

Provider Gender: Male

NPI: 1891237756

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

FARRAR, COURTNEY

Provider ID: 303843

Board Certified Specialty: No

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

FARRAR, COURTNEY

Provider ID: 295259

Board Certified Specialty: No

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST


JOHNSON, KENNADY

Provider ID: 305041
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1730834417

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER

Provider ID: 206523
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1114472230


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST



MC ELROY, CARTER

Provider ID: 206522
Board Certified Specialty: No
 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (855) 543-0333
Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male
NPI: 1114472230


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, HARRY


Provider ID: 271871
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1629558499

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

NUTHALL, KAITLIN




Provider ID: 202326
Board Certified Specialty: No
 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122
 Phone: (858) 249-0832
Fax: (858) 657-1809

 After Hours Phone: (858)
249-0832








Provider Gender: Female
NPI: 1992210090

 Provider English Spoken: Y








D3. 專業提供者目錄

Cultural Competency: N
*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*





REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW
Provider ID: 287652
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1063882579
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

REGISTERED PHYSICAL THERAPIST








RUDD, CHRISTOPHER
Provider ID: 207560
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1831539337
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE
Provider ID: 206547
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1386964997
 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY
Provider ID: 285183
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1942818505
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

D3. 專業提供者目錄

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870

Board Certified Specialty: No

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 535-6422

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1720489503

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259684

Board Certified Specialty: No

4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689962169

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259683

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689962169

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296929

Board Certified Specialty: No

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296932

Board Certified Specialty: No

 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female


NPI: 1063660165


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296930

Board Certified Specialty: No

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A


SPEECH PATHOLOGIST

CALDERON MORALES, ASTRID

Provider ID: 305581

Board Certified Specialty: No

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123



 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1619501186

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Armenian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

SPEECH PATHOLOGIST

CALDERON MORALES, ASTRID


Provider ID: 305580

Board Certified Specialty: No

 7510 CLAIREMONT MESA

BLVD STE 103

SAN DIEGO, CA 92111

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1619501186

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Armenian, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

CALDERON MORALES, ASTRID

Provider ID: 305579

Board Certified Specialty: No

 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1619501186

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Armenian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM Provider Gender: Female


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA


Provider ID: 296920

Board Certified Specialty: No

 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296922

Board Certified Specialty: No

 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 7:00AM-9:00PM
M-F 7:00AM-9:00PM


 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296921

Board Certified Specialty: No

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296575

Board Certified Specialty: No

 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

 Phone: (858) 277-2277


Fax: (818) 357-2505

 After Hours Phone: (858)
277-2277

Provider Gender: Female

NPI: 1205443769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM


 Website: N/A


SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296576

Board Certified Specialty: No

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)

D3. 專業提供者目錄

757-8353
Provider Gender: Female
NPI: 1205443769
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST

MADERA RIVERA, PAULA

Provider ID: 296578
Board Certified Specialty: No
 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1205443769
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM

Website: N/A

SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296588
Board Certified Specialty: No
 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1275021438

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296586
Board Certified Specialty: No
 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1275021438

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296585
Board Certified Specialty: No
 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1275021438
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

SPEECH PATHOLOGIST

D3. 專業提供者目錄

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384

Board Certified Specialty: No

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 657-7237

After Hours Phone: (858)
657-7237

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286363

Board Certified Specialty: No

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

D3. 專業提供者目錄

Provider ID: 273363
Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286387

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6886
🕒 After Hours Phone: (619)
543-6886

Provider Gender: Female

NPI: 1518163005

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286366

Board Certified Specialty: No

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163005

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278553

Board Certified Specialty: No

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


D3. 專業提供者目錄


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286370

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 529-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


AL-NOURI, OMAR

Provider ID: 211903

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


ARMANI, AVA

Provider ID: 282141

Board Certified Specialty: Yes


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1861759383

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MEDICAL

CTR AT UCSF, UCSF Medical

Center At Mission Bay, UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

BARNES, RYAN

Provider ID: 299904

Board Certified Specialty: No

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 Phone: (858) 565-0104

Fax: (858) 565-0194

 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1831493501

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, PALOMAR


HEALTH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-4:30PM

 Website: N/A

SURGERY GENERAL

D3. 專業提供者目錄

BARNES, RYAN

Provider ID: 129062

Board Certified Specialty: No

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1831493501

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-4:30PM

Website: N/A

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 129060

Board Certified Specialty: Yes

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1669700753

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

Website: N/A

SURGERY GENERAL

BENCH, SHAWN

Provider ID: 299895

Board Certified Specialty: Yes

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1669700753

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM
Website: N/A

SURGERY GENERAL

BERUMEN, JENNIFER

Provider ID: 260052

Board Certified Specialty: No

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1558566372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 286342

Board Certified Specialty: No

4303 LA JOLLA VILLAGE

D3. 專業提供者目錄

DR STE 2110
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 201617

Board Certified Specialty: Yes

📍 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

☎ Phone: (858) 657-8860

🕒 After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1619252418

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 247073

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 285272

Board Certified Specialty: No

📍 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1790104305

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 289164

Board Certified Specialty: No

📍 8001 FROST ST
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8354

Fax: (858) 966-5815

🕒 After Hours Phone: (858)
966-8354

Provider Gender: Female

NPI: 1790104305

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. 專業提供者目錄

American Sign Language (ASL): **CASILLAS BERUMEN, SERGIO**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


CASILLAS BERUMEN, SERGIO

Provider ID: 304608

Board Certified Specialty: No

 6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120


 Phone: (619) 500-7699

Fax: (619) 483-3997

 After Hours Phone: (619)
500-7699

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PALOMAR


MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

Provider ID: 304609

Board Certified Specialty: No

 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115


 Phone: (619) 582-4490

Fax: (619) 501-9702

 After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PALOMAR

MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 260842

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


HORGAN, SANTIAGO

Provider ID: 286379

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-0700

 After Hours Phone: (619)
471-0700

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


IGNACIO, ROMEO


Provider ID: 217053

Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL
2


SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538147145

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 286355

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 201729

Board Certified Specialty: No

 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

 Phone: (858) 657-8860

 After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286356

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

D3. 專業提供者目錄

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265649966

🗉 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

KOSOY, DANIEL

Provider ID: 82513

Board Certified Specialty: No

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

☎ Phone: (858) 499-1900

Fax: (858) 637-4801

📞 After Hours Phone: (858) 499-1900

Provider Gender: Male

NPI: 1770627259

🗉 Provider English Spoken: Y

🗉 Provider Language(s)

Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

9:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 300091

Board Certified Specialty: No

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123

☎ Phone: (858) 565-0104

Fax: (858) 565-0194

📞 After Hours Phone: (858) 565-0104

Provider Gender: Male

NPI: 1629179684

🗉 Provider English Spoken: Y

🗉 Provider Language(s)

Spoken: Spanish,

Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH

8:30AM-5:00PM

F 8:30AM-4:00PM

🌐 Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298

Board Certified Specialty: No

📍 7910 FROST ST STE 250

SAN DIEGO, CA 92123

☎ Phone: (858) 565-0104

Fax: (858) 565-0194

📞 After Hours Phone: (858) 565-0104

Provider Gender: Male

NPI: 1629179684

🗉 Provider English Spoken: Y

🗉 Provider Language(s)

Spoken: Spanish,

Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH

8:30AM-5:00PM

F 8:30AM-4:00PM

🌐 Website: N/A

SURGERY GENERAL

POLLACK, LARRY

Provider ID: 54346

Board Certified Specialty: Yes

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123

☎ Phone: (858) 565-0104

Fax: (858) 565-0194

📞 After Hours Phone: (858) 565-0104

Provider Gender: Male

NPI: 1104998400

🗉 Provider English Spoken: Y

🗉 Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

D3. 專業提供者目錄

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

 Website: N/A

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286383

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043410186

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


SANDLER, BRYAN

Provider ID: 286357

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043410186

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033529201

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

VASCULAR

AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

D3. 專業提供者目錄

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275372

Board Certified Specialty: No

4510 EXECUTIVE DR STE 215

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY HAND

CAGE, DORI NEILL

Provider ID: 296731

Board Certified Specialty: No

8008 FROST ST STE 403
SAN DIEGO, CA 92123

Phone: (858) 715-9200

Fax: (858) 715-9202

After Hours Phone: (858) 715-9200

Provider Gender: Female

NPI: 1871592253

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Email: DCAGE@SDHAND.ORG

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244087

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-5720

After Hours Phone: (619) 543-5720

Provider Gender: Male

NPI: 1093730251

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

BELVERUD, SHAWN

Provider ID: 202333

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1073817268

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 304129

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

D3. 專業提供者目錄

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942469663

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY NEUROLOGICAL

LEVY, MICHAEL

Provider ID: 298705

Board Certified Specialty: No

📍 7910 FROST ST STE 180
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8574

Fax: (858) 966-7930

☎ After Hours Phone: (858) 966-8574

Provider Gender: Male

NPI: 1164593927

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

CHILDRENS HOSP OF LOS

ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SURGERY NEUROLOGICAL

MARSHALL, LAWRENCE

Provider ID: 244150

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1750306171

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242007

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437416591

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437416591

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

D3. 專業提供者目錄

SURGERY NEUROLOGICAL


PHAM, MARTIN


Provider ID: 244158

Board Certified Specialty: No

 16950 VIA TAZON


SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes

 8008 FROST ST STE 401

SAN DIEGO, CA 92123

 Phone: (858) 560-8544

Fax: (858) 560-8546

 After Hours Phone: (858) 560-8544

Provider Gender: Male

NPI: 1265495014

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSP MED CTR, ALVARADO

HOSPITAL LLC, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-4:30PM

 Website: N/A

Email: JSOUMEKH@AOL.COM

SURGERY NEUROLOGICAL


TOMLIN, JEFFREY


Provider ID: 272950

Board Certified Specialty: No

 200 W ARBOR DR FL 1


SAN DIEGO, CA 92103

 Phone: (858) 657-8540

 After Hours Phone: (858) 657-8540

Provider Gender: Male

NPI: 1366530321

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


U, HOI


Provider ID: 244132

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1164468146

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


ANDRY, JAMES

Provider ID: 302086


Board Certified Specialty: No

 7910 FROST ST STE 340

SAN DIEGO, CA 92123

 Phone: (858) 824-1703


Fax: (858) 455-6473

 After Hours Phone: (858) 824-1703

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

D3. 專業提供者目錄

VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


BALLARD, BROOKE

Provider ID: 262204

Board Certified Specialty: No

 5555 RESERVOIR DR STE
104

SAN DIEGO, CA 92120

 Phone: (619) 286-9480

Fax: (619) 286-4568

 After Hours Phone: (619)
286-9480

Provider Gender: Female

NPI: 1841447950

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

BLAIS, MICAH

Provider ID: 299943

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972867562

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


BUI, CHRISTOPHER


Provider ID: 241162

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619231537

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY ORTHOPEDIC

BUKATA, SUSAN


Provider ID: 277948

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 304181

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932140639

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

CAMPBELL, TANNER

Provider ID: 301633

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-8519

After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1821593096

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU TSUN

Provider ID: 301903

Board Certified Specialty: No

3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1992982854

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 304174

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. 專業提供者目錄

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 296446

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 246466

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


EDMONDS, ERIC

Provider ID: 205495

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1013048412

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


EDMONDS, ERIC

Provider ID: 260841

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1013048412

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 304177

Board Certified Specialty: No

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male








NPI: 1629239140

 Provider English Spoken: Y









D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*





SURGERY ORTHOPEDIC



FLINT, JAMES
Provider ID: 203178
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (858) 657-8200*
 *After Hours Phone: (858) 657-8200*
Provider Gender: Male
NPI: 1629239140
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY ORTHOPEDIC





GOEB, YANNICK
Provider ID: 284794
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Male
NPI: 1730542747
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: German, Spanish*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY ORTHOPEDIC




JACKSON, MADELEINE
Provider ID: 301818
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1386140085
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

SURGERY ORTHOPEDIC




KUSNEZOV, NICHOLAS
Provider ID: 303196
Board Certified Specialty: No
 7910 FROST ST STE 340
SAN DIEGO, CA 92123
 *Phone: (858) 824-1703*
Fax: (858) 455-6473
 *After Hours Phone: (858) 824-1703*
Provider Gender: Male
NPI: 1396185161
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N


D3. 專業提供者目錄




 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

PRUSS, ERIKA



Provider ID: 303797
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
Provider Gender: Female
NPI: 1538402441



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437565488
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 304164
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437565488
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N



 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO



Provider ID: 299909
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407380512
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

TAYLOR, MARIO

Provider ID: 304142
Board Certified Specialty: No
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407380512
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1548417652

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC


UPASANI, VIDYADHAR

Provider ID: 205914

Board Certified Specialty: No


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A

SURGERY ORTHOPEDIC


UPASANI, VIDYADHAR

Provider ID: 260953

Board Certified Specialty: No

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123


 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

BICKLER, STEPHEN

Provider ID: 270090

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1891866653

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

GOSMAN, AMANDA

Provider ID: 205841

Board Certified Specialty: Yes

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4064

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1164436291

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 285941

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

D3. 專業提供者目錄

Fax: (858) 966-7712

☎ After Hours Phone: (858) 966-7711

Provider Gender: Male

NPI: 1285953364

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 272196

Board Certified Specialty: No

📍 7920 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 966-4064

☎ After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1285953364

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 205340

Board Certified Specialty: No

📍 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711

Fax: (858) 966-7712

☎ After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL

NAVAL MED CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 283380

Board Certified Specialty: No

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711

Fax: (858) 966-7712

☎ After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1982775144

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL

NAVAL MED CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140

Board Certified Specialty: No

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711





Fax: (858) 966-7712

☎ After Hours Phone: (858)
966-7711

Provider Gender: Male




NPI: 1538365002





D3. 專業提供者目錄

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY PEDIATRIC




LAZAR, DAVID





Provider ID: 205606
Board Certified Specialty: No
 8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
Fax: (858) 966-7712
 *After Hours Phone: (858) 966-7711*
Provider Gender: Male
NPI: 1538365002

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY PEDIATRIC




THANGARAJAH, HARIHARAN

Provider ID: 206172
Board Certified Specialty: No
 8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
Fax: (858) 966-7712
 *After Hours Phone: (858) 966-7711*
Provider Gender: Male
NPI: 1598979593




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN



Provider ID: 256194
Board Certified Specialty: No
 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
 *After Hours Phone: (858) 966-7711*
Provider Gender: Male
NPI: 1598979593





 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277288
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1346674561

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

SURGERY PLASTIC

D3. 專業提供者目錄

HINCHCLIFF, KATHARINE

Provider ID: 277965

Board Certified Specialty: No

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1346674561

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246240

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246239

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576

Board Certified Specialty: No

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999






Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female






NPI: 1790341832



D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




SURGERY PLASTIC

LEWIS, PRIYA




Provider ID: 302132
Board Certified Specialty: No
 7920 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 966-8394
 After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1720465024
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A




SURGERY PLASTIC **REID, CHRISTOPHER**




Provider ID: 224795
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




SURGERY PLASTIC **REID, CHRISTOPHER**

Provider ID: 245523
Board Certified Specialty: No
 7920 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 966-5999
Fax: (858) 966-8394
 After Hours Phone: (858)
966-5999
Provider Gender: Male
NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY PLASTIC **REID, CHRISTOPHER**

Provider ID: 255564
Board Certified Specialty: No
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC **FOX, KENNETH**

D3. 專業提供者目錄

Provider ID: 257841

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8030

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1235153552

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

GANTA, SRUJAN

Provider ID: 275611

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1265071005

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N
After Hours Phone: (858)
966-8030

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

GANTA, SRUJAN

Provider ID: 256383

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1265071005

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

LEWIS, MICHAEL

Provider ID: 296906

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

Provider Gender: Male

NPI: 1780847533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: No

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1881707818

Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. 專業提供者目錄

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

TRANSPLANT SURGERY


MEKEEL, KRISTIN


Provider ID: 262109

Board Certified Specialty: Yes

 3020 CHILDRENS WAY STE 107

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858) 966-7711

Provider Gender: Female

NPI: 1104861947

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

TRANSPLANT SURGERY


SCHNICKEL, GABRIEL

Provider ID: 262192

Board Certified Specialty: No

 8001 FROST ST

SAN DIEGO, CA 92123


 Phone: (858) 966-8354

Fax: (858) 966-5815

 After Hours Phone: (858) 966-8354

Provider Gender: Male

NPI: 1619111440

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY


CHEN, TONY

Provider ID: 283960

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1245684497

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, PALOMAR MEDICAL

CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY


KATZ, JONATHAN

Provider ID: 299918

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1952756207

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

UROLOGY

MONGA, MANOJ

Provider ID: 274480

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

D3. 專業提供者目錄

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY

MONGA, MANOJ

Provider ID: 256847

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174609127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY


PATEL, DEVIN

Provider ID: 246094

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (858) 657-7876

 After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1437505559

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
CEDARS SINAI MEDICAL


CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


UROLOGY

SAIDIAN, AVA

Provider ID: 284831

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205281912

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY


SALMASI, AMIRALI

Provider ID: 203122

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609187962

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

GROSSMONT HOSPITAL



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


UROLOGY


SALMASI, AMIRALI

Provider ID: 302912

Board Certified Specialty: No


 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

 Phone: (858) 485-0554

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1609187962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


UROLOGY

SWORDS, KELLY

Provider ID: 206183

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 966-7484

Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1316101256

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


UROLOGY


UNTERBERG, STEPHEN

Provider ID: 295834

Board Certified Specialty: No


 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

 Phone: (858) 485-0554
Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


UROLOGY

UNTERBERG, STEPHEN


Provider ID: 284665

Board Certified Specialty: No

 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

Provider Gender: Male

NPI: 1215374210

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA


VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

UROLOGY







UNTERBERG, STEPHEN

Provider ID: 295833

Board Certified Specialty: Yes

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

D3. 專業提供者目錄


 Phone: (619) 297-4707
Fax: (858) 429-7927
 After Hours Phone: (619) 297-4707
Provider Gender: Male
NPI: 1215374210
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

UROLOGY

UNTERBERG, STEPHEN



Provider ID: 284664
Board Certified Specialty: Yes
 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
 Phone: (619) 297-4707
Fax: (858) 429-7927
 After Hours Phone: (619) 297-4707
Provider Gender: Male
NPI: 1215374210
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299933
Board Certified Specialty: No
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033630173
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A






SAN MARCOS

CARDIOVASCULAR DISEASE

LERNER, JONATHAN







Provider ID: 303448
Board Certified Specialty: No
 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
 Phone: (760) 798-8855
Fax: (619) 616-2104
 After Hours Phone: (760)

798-8855

Provider Gender: Male
NPI: 1962899823
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 303128
Board Certified Specialty: No
 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1588173629
 Provider English Spoken: Y
 Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298658

Board Certified Specialty: No

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 296603

Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1639673858


Provider English Spoken: Y
Cultural Competency: N


D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No

 150 VALPREDA RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767


Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1629242839

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN


MUIR MEDICAL CENTER


WALNUT CREEK CAMPUS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

KOHOUT, KATHRYN

Provider ID: 291105

Board Certified Specialty: No
 150 VALPREDA RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 556-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1316544331


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MAROSOK, MICHELLE

Provider ID: 305310

Board Certified Specialty: No

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

 Phone: (760) 748-8935

Fax: (760) 466-0078

 After Hours Phone: (760)
748-8935

Provider Gender: Female

NPI: 1669166112

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\199

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

 Phone: (760) 747-8935

Fax: (760) 466-0078

 After Hours Phone: (760)
747-8935

Provider Gender: Female


NPI: 1700470200


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


PARSONS, MEKRAE


Provider ID: 303220

Board Certified Specialty: No

 150 VALPREDA RD
SAN MARCOS, CA 92069

D3. 專業提供者目錄


 Phone: (760) 736-6767

 Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1972090306

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


PRIETO, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1699222620

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


VAHDAT, VALERIE

Provider ID: 294758

Board Certified Specialty: No

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642


 Fax: (360) 462-5827

 After Hours Phone: (833)

867-4642

Provider Gender: Female

NPI: 1093474090

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1407287469

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CHIROPRACTOR


HINES, TAYTE


Provider ID: 302081

Board Certified Specialty: No

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642

 Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

Provider Gender: Male

NPI: 1598265647

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CHIROPRACTOR



HINES, TAYTE

Provider ID: 302080

Board Certified Specialty: No

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

D3. 專業提供者目錄

 Phone: (833) 867-4642
 Fax: (360) 462-5827


 After Hours Phone: (833) 867-4642


Provider Gender: Male
NPI: 1598265647

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 305242



Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

Provider Gender: Male
NPI: 1275630618


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 296592



Board Certified Specialty: No

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767
 Fax: (760) 736-6767

 After Hours Phone: (760) 736-6767

Provider Gender: Male
NPI: 1275630618


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bengali

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 299258



Board Certified Specialty: No

 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

 Phone: (760) 520-8200
 Fax: (360) 462-2749

 After Hours Phone: (760) 520-8200

Provider Gender: Male
NPI: 1467485078

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A



INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 305472



Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 Fax: (760) 566-1501

 After Hours Phone: (760) 736-6767

Provider Gender: Male
NPI: 1467485078


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM


 Website: N/A

INTERNAL MEDICINE





TOLENTINO, ARTURO




Provider ID: 298696

Board Certified Specialty: No

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069





D3. 專業提供者目錄




 Phone: (833) 867-4642
Fax: (360) 462-5827
 After Hours Phone: (833) 867-4642
Provider Gender: Male
NPI: 1609066018
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\17
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL **CARDIOLOGY**

DO, HULBERT







Provider ID: 291583
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1679733760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-8:00PM
 Website: N/A

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT






Provider ID: 295941
Board Certified Specialty: No
 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
 Phone: (760) 798-8855
Fax: (619) 616-2104
 After Hours Phone: (760) 798-8855
Provider Gender: Male
NPI: 1679733760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A




INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578
Board Certified Specialty: No

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078
 Phone: (760) 798-8855
Fax: (760) 755-5245
 After Hours Phone: (760) 798-8855
Provider Gender: Male
NPI: 1831393289
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI


Provider ID: 291607
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1811307051
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP

D3. 專業提供者目錄


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052

Board Certified Specialty: No

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

 Phone: (760) 798-8855

Fax: (619) 616-2104

 After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital, SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847

Board Certified Specialty: No

 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

 Phone: (760) 798-8855

Fax: (619) 616-2104

 After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

ANDER, AZIZ

Provider ID: 290382

Board Certified Specialty: No

 838 NORDAHL RD STE 310
SAN MARCOS, CA 92069



 Phone: (442) 999-5977

Fax: (442) 999-5914

 After Hours Phone: (442)
999-5977

Provider Gender: Male

NPI: 1316131832

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Faroese

Cultural Competency: N


Hospital Affiliation: DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA


Provider ID: 304998

Board Certified Specialty: No

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662


Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1316471485

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N


Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. 專業提供者目錄

NEUROLOGY

SORIA LOPEZ, JOSE

Provider ID: 295745

Board Certified Specialty: No

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Phone: (760) 281-3662

Fax: (760) 316-5268

After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1225474034

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

CABRERA, MICHELLE

Provider ID: 303025

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1174774723

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Adventist

Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL

Provider ID: 288907

Board Certified Specialty: No

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Phone: (760) 740-2710

Fax: (858) 207-0003

After Hours Phone: (760)
740-2710

Provider Gender: Male

NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GUAN, HOWARD

Provider ID: 302370

Board Certified Specialty: No

100 N RANCHO SANTA FE
RD STE 126

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 290-7044

After Hours Phone: (760)
598-0400

Provider Gender: Male

NPI: 1134427636

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,

LOMA LINDA UNIVERSITY

CHILDRENS HOSPITAL,

RIVERSIDE COUNTY

REGIONAL MED CTR, TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GUAN, HOWARD




Provider ID: 303144





Board Certified Specialty: No

100 N RANCHO SANTA FE
RD STE 126

SAN MARCOS, CA 92069






D3. 專業提供者目錄




 Phone: (760) 598-0400
 Fax: (760) 290-7044
 After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1134427636

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, RIVERSIDE COUNTY REGIONAL MED CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\0
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY










PRESTERA, TORY

Provider ID: 204707
Board Certified Specialty: Yes
 100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 598-5270
 After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1346224557
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A
Email: PRESTERA@YAHOO.COM

OPHTHALMOLOGY









PRESTERA, TORY

Provider ID: 290590
Board Certified Specialty: Yes
 100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 598-5270
 After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1346224557
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 10\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

Email: PRESTERA@YAHOO.COM




PEDIATRICS

LUM HO, RACHEL





Provider ID: 303150
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-6797
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1215469283
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

LUM HO, RACHEL








Provider ID: 304047
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-6797
 After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1215469283

D3. 專業提供者目錄

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

POSADAS, EMERITO






Provider ID: 257536
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1720093198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM

 Website: N/A

PEDIATRICS





QUINTERO, CAROLYN





Provider ID: 303142
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1023033156

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT








CELESTINO, MISH EL

Provider ID: 302439
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1578263760
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


PHYSICIANS ASSISTANT

GRAF, HALEY

Provider ID: 301290
Board Certified Specialty: No
 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 436-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
436-6767
Provider Gender: Female
NPI: 1598394371
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336
Board Certified Specialty: No
 150 VALPRED A RD

D3. 專業提供者目錄

SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6767

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1457903700

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

MATHIAS, WILLIAM

Provider ID: 302570

Board Certified Specialty: No

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1285806323

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 296093

Board Certified Specialty: No

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1225608722

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

ALTAMIRANO, LEON

Provider ID: 290362

Board Certified Specialty: No

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1619271517

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

ARIELLA, LYND A

Provider ID: 299716

Board Certified Specialty: No

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1073518965

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\50

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

CORTIZO, ROSA

Provider ID: 290796

Board Certified Specialty: No

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

🕒 After Hours Phone: (760) 736-6767

Provider Gender: Female







NPI: 1952316648

D3. 專業提供者目錄

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A



PSYCHOLOGIST





FLYNN, DANIELLE

Provider ID: 290795
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1477785137
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST









GEORGIEV, MARY JO

Provider ID: 290793
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 737-6767
Fax: (760) 736-8740

 After Hours Phone: (760)
737-6767
Provider Gender: Female
NPI: 1518996875
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


PSYCHOLOGIST

IMAM, SYED

Provider ID: 298174
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1447428271
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A







PSYCHOLOGIST

SIMPSON, ERIC

Provider ID: 290803
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1710110416
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

TORRES, HECTOR

Provider ID: 290788
Board Certified Specialty: No
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1720265614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D3. 專業提供者目錄

 Website: N/A

RHEUMATOLOGY


AL NAHLAWI, BASMA

Provider ID: 295532

Board Certified Specialty: No

 960 W SAN MARCOS BLVD
STE 210

SAN MARCOS, CA 92078


 Phone: (760) 736-8091

Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA


LINDA UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RHEUMATOLOGY

AL NAHLAWI, BASMA

Provider ID: 290068

Board Certified Specialty: No

 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078


 Phone: (760) 736-8091

Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091

Provider Gender: Female

NPI: 1144455262

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SAN YSIDRO

CERTIFIED NURSE


PRACTITIONER

IBARRA, MARTHA


Provider ID: 304292

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 294925

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. 專業提供者目錄

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1912223496

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM

SA 8:00AM-2:00PM

Website: N/A

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

FAMILY PRACTICE

MALEKMADANI, ARIENNE

Provider ID: 303333

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1124648332

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

FAMILY PRACTICE

NAVARRO, VANESSA

Provider ID: 297756

Board Certified Specialty: No

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM

Website: N/A

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 295225

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100


Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Provider Gender: Male

D3. 專業提供者目錄

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


FAMILY PRACTICE

ORTIZ ILIZALITURRI, ANA

Provider ID: 296008

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1316407026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

VAN PRATT LEVIN, AISHA

Provider ID: 303300

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1821550559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENERAL PRACTICE

GARCIA-SANDOVAL, DAMARIS

Provider ID: 302644

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 662-4198

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1447838883

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENERAL PRACTICE

SAMI, REMAN

Provider ID: 305484

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. 專業提供者目錄


 Website: N/A


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290421

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INTERNAL MEDICINE

BULOW, KWI


Provider ID: 302346

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073608576

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

PROMER, KATHERINE


Provider ID: 293527

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1306280607

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-2:00PM


 Website: N/A


INTERNAL MEDICINE

RAMIREZ SANCHEZ, CLAUDIA

Provider ID: 296122

Board Certified Specialty: Yes

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-2:00PM


 Website: N/A


INTERNAL MEDICINE

SY, RAMON

Provider ID: 297757

Board Certified Specialty: No

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

D3. 專業提供者目錄

Fax: (619) 785-3384

☎ After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1982617403

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 290490

Board Certified Specialty: No

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 428-4463

Fax: (213) 250-3369

☎ After Hours Phone: (619)
428-4463

Provider Gender: Female

NPI: 1316146996

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): **OBSTETRICS / GYNECOLOGY**

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 290471

Board Certified Specialty: No

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-1967

☎ After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1982617494

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294885

Board Certified Specialty: No

📍 4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-6341

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1255878997

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

🌐 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294886

Board Certified Specialty: No

📍 4050 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 205-1967

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1255878997

☑ Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
 Website: N/A


OPHTHALMOLOGY

DE SILVA, NIHAL

Provider ID: 290551
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1003834789

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
MARINHEALTH AND
MARINHEALTH MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRICS


FUJII, CINDY

Provider ID: 298309
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1871664821

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

PEDIATRICS


RODRIGUEZ, ALDO


Provider ID: 295779
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 662-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

PEDIATRICS

TAYLOR, TASHA

Provider ID: 290077
Board Certified Specialty: No
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528144433

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PSYCHOLOGIST

IBANEZ, BERENICE


Provider ID: 290465
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

D3. 專業提供者目錄

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1740394386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

JOHNSON, JENNIFER

Provider ID: 301296

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1023783248

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\64

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


TORRES, JOANN

Provider ID: 296045

Board Certified Specialty: No


 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1134732522

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SPEECH PATHOLOGIST


HILL, CARLA

Provider ID: 295894


Board Certified Specialty: No

 3364 BEYER BLVD STE
102-103

SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1043950751

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SANTEE


PHYSICIANS ASSISTANT

ROSENBLATT, SHERI

Provider ID: 295738

Board Certified Specialty: No

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 10:00AM-2:30PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


MOORE, BRIAN

Provider ID: 243961

Board Certified Specialty: No

 9640 MISSION GORGE RD
STE H

SANTEE, CA 92071

 Phone: (619) 460-2770

D3. 專業提供者目錄

Fax: (619) 460-2774

☎ After Hours Phone: (619)
460-2770

Provider Gender: Male

NPI: 1831144005

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

VENKATESH, VIJAY

Provider ID: 269661

Board Certified Specialty: No

📍 9640 MISSION GORGE RD
STE H
SANTEE, CA 92071

☎ Phone: (619) 460-2770

Fax: (619) 460-2774

☎ After Hours Phone: (619)
460-2770

Provider Gender: Male

NPI: 1689627085

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

BOUELLE, DAVID

Provider ID: 248308

Board Certified Specialty: No

📍 9830 PROSPECT AVE STE A
SANTEE, CA 92071

☎ Phone: (619) 448-4860

Fax: (619) 448-1639

☎ After Hours Phone: (760)
591-7750

Provider Gender: Male

NPI: 1063461101

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM

🌐 Website: N/A

TEMECULA

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290944

Board Certified Specialty: No

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

☎ Phone: (951) 225-6400

Fax: (360) 462-2751

☎ After Hours Phone: (951)
225-6400

Provider Gender: Male

NPI: 1659745610

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300260

Board Certified Specialty: No

📍 31170 TEMECULA PKWY
STE 200
TEMECULA, CA 92592

☎ Phone: (951) 699-3299

Fax: (951) 302-1313

☎ After Hours Phone: (951)
699-3299

Provider Gender: Female

NPI: 1144539842

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300846

Board Certified Specialty: No

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

Phone: (951) 225-7873

Fax: (951) 305-9117

After Hours Phone: (951)
225-7873

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290633

Board Certified Specialty: No

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (858) 633-4697

After Hours Phone: (951)
225-6400

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206759

Board Certified Specialty: No

31700 TEMECULA VALLEY
PARKWAY
TEMECULA, CA 92592

Phone: (951) 303-2349

Fax: (951) 303-8591

After Hours Phone: (951)
303-2349

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

VISTA

ANESTHESIOLOGY PAIN

MANAGEMENT

GUPTA, ANUJ

Provider ID: 297703

Board Certified Specialty: No

2023 W VISTA WAY STE D
VISTA, CA 92083

Phone: (619) 330-8771

Fax: (619) 330-8772

After Hours Phone: (619)
330-8771

Provider Gender: Male

NPI: 1073629549

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
PARADISE VALLEY HOSPITAL,
TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

CARAMEDBILL@AOL.COM

CARDIOVASCULAR DISEASE

DO, HULBERT

Provider ID: 290574

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

D3. 專業提供者目錄

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679733760

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 9:00AM-8:00PM
M-TH 9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

SONG, CAROL

Provider ID: 290550

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1518166685

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257586

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1902120421

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257587

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (844) 308-5003

Fax: (760) 414-3763

☎ After Hours Phone: (844) 308-5003

Provider Gender: Female

NPI: 1902120421

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 304506

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3702

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1629354360

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER

BERNETICH, MEGHAN

Provider ID: 302526

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3702

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No

📍 910 SYCAMORE AVE STE
270
VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301312

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301311

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303927

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

D3. 專業提供者目錄

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303929
Board Certified Specialty: No
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303932
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Provider Gender: Male

NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303928
Board Certified Specialty: No
517 N HORNE ST
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1194027706

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

HALGEDAHL, YI

Provider ID: 241907
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892


After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1619246907


Provider English Spoken: Y
Provider Language(s)
Spoken: Mandarin


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. 專業提供者目錄

American Sign Language (ASL):  1000 VALE TERRACE DR
VISTA, CA 92084

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 303439

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302286

Board Certified Specialty: No

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302287

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302291

Board Certified Specialty: No

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1407545221

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

D3. 專業提供者目錄


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302296

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female


NPI: 1013668680


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 298085

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000




 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y








D3. 專業提供者目錄

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER








KELLEHER, BRIDGET

Provider ID: 305737
Board Certified Specialty: No
 105 DURIAN ST STE B
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000
Provider Gender: Female
NPI: 1245695006
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298083
Board Certified Specialty: No
 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)*
631-5000
Provider Gender: Female
NPI: 1245695006
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282072
Board Certified Specialty: No
 910 SYCAMORE AVE STE
102
VISTA, CA 92081
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1093895047
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY, KEITH ALLEN

Provider ID: 295288
Board Certified Specialty: No
 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000
Provider Gender: Male
NPI: 1790978617
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TU*
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

D3. 專業提供者目錄

MONTGOMERY, KEITH ALLEN

Provider ID: 295284

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

NICHOLAS, ESTELA

Provider ID: 239866

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1558384792

🗣 Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PRITZKER, JOELY

Provider ID: 239773

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

🗣 Provider English Spoken: Y

🗣 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SHAHBAZ, LINNAE

Provider ID: 304820

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1427712215

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU-W
0:00PM-8:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281857

Board Certified Specialty: No

📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

D3. 專業提供者目錄


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295502

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295507

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504

Board Certified Specialty: No

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-2:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303840

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1679926208


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WINDHAM, SUZONNE

Provider ID: 303721

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

D3. 專業提供者目錄

Provider Gender: Female

NPI: 1679926208

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WINDHAM, SUZONNE

Provider ID: 303724

Board Certified Specialty: No

 105 DURIAN ST STE A

VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1679926208

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WINDHAM, SUZONNE

Provider ID: 303726


Board Certified Specialty: No

 1000 VALE TERRACE DR

VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1679926208

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WINDHAM, SUZONNE

Provider ID: 303842

Board Certified Specialty: No

 1000 VALE TERRACE DR

VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1679926208

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


YCASAS, EMILY

Provider ID: 298837

Board Certified Specialty: No

 1000 VALE TERRACE DR

VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1033841861

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-8:00PM

 Website: N/A


CERTIFIED REGISTERED

NURSE MIDWIFE


GUIDI, CASEY

Provider ID: 300224

Board Certified Specialty: No

 1000 VALE TERRACE DR

VISTA, CA 92084

 Phone: (760) 631-5000

D3. 專業提供者目錄

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 303315

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

🌐 Website: N/A

CHIROPRACTOR

CORTEZ, JAIME

Provider ID: 290483

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 414-3892

Fax: (760) 631-5000

☎ After Hours Phone: (760)
414-3892

Provider Gender: Male

NPI: 1508195348

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290220

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE


HIKES, RYAN

Provider ID: 291652

Board Certified Specialty: No

D3. 專業提供者目錄

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male


NPI: 1609862358


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298007

Board Certified Specialty: No


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629509260

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

MARTINEZ, LESLY

Provider ID: 298003

Board Certified Specialty: No


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629509260

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM

W-F 8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 305346

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1891069662


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 305347

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1891069662


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293354

D3. 專業提供者目錄

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1871791749

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 293349

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (844) 308-5003

Fax: (760) 414-3763

🕒 After Hours Phone: (844)
308-5003

Provider Gender: Female

NPI: 1871791749

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

🌐 Website: N/A

HOSPICE AND PALLIATIVE

MEDICINE

RUBENSIK, TAMARA

Provider ID: 282128

Board Certified Specialty: No

📍 910 SYCAMORE AVE STE
102

VISTA, CA 92081

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

HALPERIN, JASON

Provider ID: 296420

Board Certified Specialty: No

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1952626228

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

DAO, MARC

Provider ID: 297754

Board Certified Specialty: No

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3763

🕒 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1467542175

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: French,
Vietnamese

Cultural Competency: N

Hospital Affiliation: PIONEERS




MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

SHARP MEMORIAL HOSPITAL,






D3. 專業提供者目錄

SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, EL CENTRO
REGIONAL MEDICAL CENTER,
PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY









PARKS, MONICA

Provider ID: 302414
Board Certified Specialty: No
 906 SYCAMORE AVE STE
104
VISTA, CA 92081
 Phone: (760) 630-2550
Fax: (760) 726-2305
 After Hours Phone: (760)
630-2550
Provider Gender: Female
NPI: 1740634971
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A








OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS

Provider ID: 290607
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1659614303
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A





OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 282168
Board Certified Specialty: No
 910 SYCAMORE AVE STE
102
VISTA, CA 92081
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1174758031
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

DIETERICH, FREDERICK


Provider ID: 304868
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Male
NPI: 1720183650
 Provider English Spoken: Y
Cultural Competency: N


D3. 專業提供者目錄


Hospital Affiliation: Providence
St Jude Medical Center,
PLACENTIA LINDA HOSP,
Foothill Regional Medical
Center, LOS ALAMITOS
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-4:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

HAWKINS, MELISSA

Provider ID: 290596

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3755

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1851620447


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-TH

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

LEONARD, LISA

Provider ID: 290710

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1477588598

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290209

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC


MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM

W 8:00AM-5:00PM

TH 10:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM


 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 273114

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL


D3. 專業提供者目錄

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P A P H
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 273113

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P A P H

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A


OPTOMETRIST

GEE, JENNIFER

Provider ID: 290208

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC

MEDICAL CENTER - D P A P H


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

KIM, MICHAEL

Provider ID: 290697

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1164546313


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-W
8:00AM-5:00PM

D3. 專業提供者目錄

TH 10:30AM-7:30PM
F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1164546313

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM
F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290238
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290236
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 242634
Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1376958389

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 277978
Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y
Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


D3. 專業提供者目錄

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290315

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TAM, EMILY


Provider ID: 290316

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303733

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 304596

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303729

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000


Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

Provider Gender: Female





NPI: 1457922957


D3. 專業提供者目錄

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

OPTOMETRIST

TRAN, JESSICA






Provider ID: 304595
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3702
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

PEDIATRICS

RAHIMI, NASSRIN






Provider ID: 257581
Board Certified Specialty: No




 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1063438166
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

PHYSICIANS ASSISTANT







WALLACE, STEPHANIE

Provider ID: 239770
Board Certified Specialty: No
 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (888)
216-8482
Provider Gender: Female
NPI: 1518104942
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

PODIATRIST

MILLER, JULIE

Provider ID: 305464
Board Certified Specialty: No
 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1619115664
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

D3. 專業提供者目錄

PODIATRIST

MILLER, JULIE

Provider ID: 290666

Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3763

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

PULMONARY DISEASES

BAUTISTA, JENNIFER

Provider ID: 300864

Board Certified Specialty: No

2067 W VISTA WAY STE 160
VISTA, CA 92083

Phone: (760) 230-8994

Fax: (760) 944-1309

After Hours Phone: (760)
230-8994

Provider Gender: Female

NPI: 1770727034

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, COMMUNITY

HOSPITAL OF THE MONTEREY

PENINSULA, NATIVIDAD

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 21\199

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248009

Board Certified Specialty: No

2067 W VISTA WAY STE 185
VISTA, CA 92083

Phone: (760) 631-5888

Fax: (760) 631-5880

After Hours Phone: (760)
591-7750

Provider Gender: Male

NPI: 1114977535

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\125

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:00PM

TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144

Board Certified Specialty: No

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: MEDICAL

CTR AT UCSF, UCSF Medical

Center At Mission Bay, UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227

D3. 專業提供者目錄

Board Certified Specialty: No

📍 2385 S MELROSE DR
VISTA, CA 92081
☎ Phone: (760) 300-3647
☎ Fax: (760) 482-1316

🕒 After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

WILDOMAR

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241737

Board Certified Specialty: No

📍 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287654

Board Certified Specialty: No

📍 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
☎ Phone: (951) 677-1111
☎ Fax: (951) 677-9757

🕒 After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1417243239

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255940

Board Certified Specialty: No

📍 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

☎ Phone: (951) 677-1111

🕒 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1619014479

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PULMONARY DISEASES






KUMAR, AVNEE

Provider ID: 300013

Board Certified Specialty: No








📍 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

D3. 專業提供者目錄

 Phone: (951) 677-1111
Fax: (951) 677-9757
 After Hours Phone: (951)
677-1111
Provider Gender: Female
NPI: 1750745394
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283349
Board Certified Specialty: No
 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
 Phone: (951) 677-1111
Fax: (951) 677-9757
 After Hours Phone: (951)
677-1111
Provider Gender: Male
NPI: 1144615337
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

D4. 醫院名錄 - 普通急症醫院

SAN DIEGO

ALVARADO HOSPITAL LLC

Provider ID: 170056

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (619) 287-3270

After Hours Phone: (619)
287-3270

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: M-F
8:00AM-4:30PM

License Number: N/A

NPI: 1265468946

Website: www.alvaradohospital.com

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA MESA

GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)
740-6000

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7

days/week

License Number: 080000006

NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)
543-4500

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127

NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

ESCONDIDO

PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)
281-5000

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO


Hours: 24 Hours / 7
days/week

License Number: 080000083

NPI: 1457321317




Website: www.palomarhealth.org/facilities/palomar-

D4. 醫院名錄 - 普通急症醫院


medical- center
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


NATIONAL CITY

PARADISE VALLEY HOSPITAL

Provider ID: 170057
 2400 E 4TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 470-4321
 After Hours Phone: (619) 470-4321

Accepting New Patients: No
Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week

License Number: N/A
NPI: 1356410351




 Website: www.paradisevalleyhospital.net

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


SAN DIEGO

RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858) 576-1700

Accepting New Patients: No

Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week

License Number: N/A
NPI: 1710065933

 Website: www.rchsd.org
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


LA JOLLA

SCRIPPS GREEN HOSPITAL


Provider ID: 171084
 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
 Phone: (858) 455-9100
 After Hours Phone: (858) 455-9100

Accepting New Patients: No
Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week




License Number: 080000139
NPI: 1841233780

 Website: www.scripps.org/locations/hospitals__scripps-green-hospital


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL HOSPITAL


Provider ID: 170045
 9888 GENESEE AVE
LA JOLLA, CA 92037
 Phone: (800) 727-4777
 After Hours Phone: (800) 727-4777

Accepting New Patients: No
Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 080000050
NPI: 1841277704

 Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

ENCINITAS

SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Provider ID: 170305
 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 753-6501
 After Hours Phone: (760) 753-6501

Accepting New Patients: No
Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:


D4. 醫院名錄 - 普通急症醫院

JCAHO


 Hours: 24 Hours / 7 days/week

License Number: 080000148

NPI: 1700829199

 Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Birth Friendly: Y


SAN DIEGO

SCRIPPS MERCY HOSPITAL

Provider ID: 170048


 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 294-8111


 After Hours Phone: (619) 294-8111

Accepting New Patients: No

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO


 Hours: 24 Hours / 7 days/week

License Number: N/A

NPI: 1659359446

 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-san-diego

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Birth Friendly: Y


CHULA VISTA


SCRIPPS MERCY HOSPITAL

CHULA VISTA

Provider ID: 170256

 435 H ST
CHULA VISTA, CA 91910

 Phone: (619) 691-7000


 After Hours Phone: (619) 691-7000

Accepting New Patients: No

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 090000074

NPI: 1659359446

 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-chula-vista

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


SAN DIEGO

SELECT SPECIALTY HOSPITAL
SAN DIEGO

Provider ID: 170165

 555 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 260-8300


 After Hours Phone: (619) 260-8300

Accepting New Patients: No

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO


 Hours: 24 Hours / 7 days/week

License Number: 090000404

NPI: 1639172133

 Website: N/A

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


CHULA VISTA

SHARP CHULA VISTA MED CTR

Provider ID: 170251

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (619) 502-5800


 After Hours Phone: (619) 502-5800

Accepting New Patients: No

Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

 Hours: 24 Hours / 7 days/week

License Number: 090000008

NPI: 1396728630

 Website: www.sharp.com/hospitals/chula-vista/

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Birth Friendly: Y

D4. 醫院名錄 - 普通急症醫院

CORONADO

SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252

250 PROSPECT PL
CORONADO, CA 92118

Phone: (619) 522-3600

After Hours Phone: (619)
522-3600

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1154304475

Website: www.sharp.com/hospitals/coronado/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000039

NPI: 1407839921

Website: www.sharp.com

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SHARP MEMORIAL HOSPITAL

Provider ID: 170047

7901 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1407839921

Website: www.sharp.com/hospitals/memorial/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

OCEANSIDE

TRI CITY MEDICAL CTR

Provider ID: 170049

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 724-8411

After Hours Phone: (760)
724-8411

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1801861190

Website: www.tricitymed.org

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

LA JOLLA

UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101


NPI: 1497021265

Website: N/A

American Sign Language (ASL):

D4. 醫院名錄 - 普通急症醫院

N


 *Accessibility: CONTACT PROVIDER*


SAN DIEGO

UCSD MEDICAL CTR

Provider ID: 170051

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (619) 543-6222*

 *After Hours Phone: (619) 543-6222*

Accepting New Patients: No


Min/Max Age: 0\150

 *Site English Spoken: Y*

Cultural Competency: N


Hospital Accreditation Status:

JCAHO

 *Hours: 24 Hours / 7 days/week*

License Number: 090000101

NPI: 1184722779

 *Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Birthing Friendly: Y

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)


CARLSBAD


N

 Accessibility: CONTACT PROVIDER

LA COSTA HOUSE

Provider ID: 662923

 6433 FLAMENCO ST
CARLSBAD, CA 92009

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A

Credentials and/or
certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-3600

Fax: (619) 502-5835

 After Hours Phone: (619)
502-3600

Accepting New Patients: No

NPI: 1538142369

 Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or
certifications:

 Site English Spoken: Y


Cultural Competency: N

American Sign Language (ASL):

SOUTH BAY POST ACUTE CARE

Provider ID: 394308


 553 F ST
CHULA VISTA, CA 91910

 Phone: (619) 426-8611

Fax: (619) 240-7378

 After Hours Phone: (619)
426-8611

Accepting New Patients: No

 Hours: M-F
9:00AM-5:30PM

NPI: 1376946277

 Website: <http://southbaypostacute.com>

Credentials and/or
certifications:


 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Filipino, Pilipino

Cultural Competency: N

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


CORONADO

VILLA CORONADO

CONVALESCENT

Provider ID: 172644

 233 PROSPECT PL
CORONADO, CA 92118


 Phone: (619) 552-3900

Fax: (619) 522-3939

 After Hours Phone: (619)
552-3900

Accepting New Patients: No

NPI: 1184607418

 Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm


Credentials and/or
certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

EL CAJON


AVOCADO POST ACUTE

Provider ID: 171985

 510 E WASHINGTON AVE
EL CAJON, CA 92020


 Phone: (619) 440-1211

Fax: (619) 956-3929

 After Hours Phone: (619)
440-1211

Accepting New Patients: No

NPI: 1568484517

 Website: www.avocadopostacute.com


Credentials and/or
certifications:

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

COTTONWOOD CANYON

HEALTHCARE CENTER

Provider ID: 171983

 1391 E MADISON AVE
EL CAJON, CA 92021

 Phone: (619) 444-1107

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

Fax: (619) 444-1403

☎ After Hours Phone: (619) 444-1107

Accepting New Patients: No

NPI: 1013953199

🌐 Website: <http://cottonwoodcanyonhc.com>

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1700973963

🌐 Website: www.countryhills.com

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin

Cultural Competency: N

American Sign Language (ASL):

Y

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS POST ACUTE

Provider ID: 503510

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

Fax: (619) 441-9029

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1063974285

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

📍 1340 E MADISON AVE
EL CAJON, CA 92021

☎ Phone: (619) 447-1020

Fax: (619) 447-1024

☎ After Hours Phone: (619) 447-1020

Accepting New Patients: No

NPI: 1346516937

🌐 Website: N/A
Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE

Provider ID: 380518

📍 635 S MAGNOLIA AVE
EL CAJON, CA 92020

☎ Phone: (616) 442-8826

Fax: (619) 442-0288

☎ After Hours Phone: (616) 442-8826

Accepting New Patients: No

NPI: 1316340227

🌐 Website: N/A
Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

📍 444 W LEXINGTON AVE
EL CAJON, CA 92020

☎ Phone: (619) 442-7744

☎ After Hours Phone: (619) 442-7744

Accepting New Patients: No

NPI: 1447653340

🌐 Website: <http://parksidehealth.net>

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog




























Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)

PROVIDER	N	N
<p>SAN DIEGO POST ACUTE CENTER <i>Provider ID: 173508</i>  1201 S ORANGE AVE EL CAJON, CA 92020  Phone: (619) 441-1988 Fax: (619) 441-7416  After Hours Phone: (619) 441-1988 Accepting New Patients: No NPI: 1285061085  Website: http://sdpostacute.com Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>THE BRADLEY COURT <i>Provider ID: 419158</i>  675 E BRADLEY AVE EL CAJON, CA 92021  Phone: (619) 448-6633 Fax: (619) 448-5462  After Hours Phone: (619) 448-6633 Accepting New Patients: No NPI: 1629129267  Website: N/A Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Language(s) Spoken: Tagalog, Spanish Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>VICTORIA POST ACUTE CARE <i>Provider ID: 387720</i>  654 S ANZA ST EL CAJON, CA 92020  Phone: (619) 440-5005  After Hours Phone: (619) 440-5005 Accepting New Patients: No NPI: 1326441239  Website: http://victoriapostacute.com Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>
<p>SOMERSET SUBACUTE AND CARE <i>Provider ID: 348526</i>  151 CLAYDELLE AVE EL CAJON, CA 92020  Phone: (619) 442-0245 Fax: (614) 423-3631  After Hours Phone: (619) 442-0245 Accepting New Patients: No NPI: 1073916987  Website: http://sometersubacute.com Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N American Sign Language (ASL):</p>	<p>VICTORIA POST ACUTE CARE <i>Provider ID: 387720</i>  654 S ANZA ST EL CAJON, CA 92020  Phone: (619) 440-5005  After Hours Phone: (619) 440-5005 Accepting New Patients: No NPI: 1326441239  Website: www.VICTORIAPOSTACUTE.com Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N American Sign Language (ASL):</p>	<p>VILLA LAS PALMAS HEALTHCARE CTR <i>Provider ID: 172020</i>  622 S ANZA ST EL CAJON, CA 92020  Phone: (619) 442-0544  After Hours Phone: (619) 442-0544 Accepting New Patients: No NPI: 1023048295  Website: http://villalaspalmascares.com Credentials and/or certifications: <input type="checkbox"/> Site English Spoken: Y Cultural Competency: N American Sign Language (ASL):</p>

D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)


 *Accessibility: CONTACT PROVIDER*


ENCINITAS

AVIARA HEALTHCARE CENTER

Provider ID: 171995

 944 REGAL RD
ENCINITAS, CA 92024

 *Phone: (760) 944-0331*

 *After Hours Phone: (760) 944-0331*

Accepting New Patients: No


NPI: 1518146620

 *Website: <http://aviarahealthcare.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977


 900 SANTA FE DR
ENCINITAS, CA 92024

 *Phone: (760) 753-6423*

Fax: (760) 753-4979

 *After Hours Phone: (760) 753-6423*

Accepting New Patients: No

 *Hours: M-F
8:00AM-5:00PM*


NPI: 1265415749

 *Website: www.covenantcare.com*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER

Provider ID: 172000


 211 SAXONY RD
ENCINITAS, CA 92024

 *Phone: (760) 632-0081*

Fax: (760) 516-2016

 *After Hours Phone: (760) 632-0081*

Accepting New Patients: No

 *Hours: M-F
7:00AM-4:00PM*

NPI: 1659482032

 *Website: N/A*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027


 421 E MISSION AVE
ESCONDIDO, CA 92025

 *Phone: (760) 747-0430*

Fax: (760) 747-0569

 *After Hours Phone: (760) 747-0430*

Accepting New Patients: No

 *Hours: M-F
8:00AM-4:30PM*


NPI: 1588660765

 *Website: <http://escondidopostacute.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

 1980 FELICITA RD
ESCONDIDO, CA 92025

 *Phone: (760) 741-6109*

 *After Hours Phone: (760) 741-6109*

Accepting New Patients: No

NPI: 1386681286

 *Website: <http://lifecarecentrofescondido.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL):

N




 *Accessibility: CONTACT PROVIDER*

PALOMAR HEIGHTS CARE CTR


Provider ID: 170055



D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

 1260 E OHIO AVE
ESCONDIDO, CA 92027
 Phone: (760) 746-1100
 After Hours Phone: (760)
746-1100

Accepting New Patients: No
NPI: 1255337440

 Website: <http://palomarhealthsrehab.com>
Credentials and/or
certifications:



 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

 201 N FIG ST
ESCONDIDO, CA 92025
 Phone: (760) 746-0303
Fax: (760) 738-1749

 After Hours Phone: (760)
746-0303

Accepting New Patients: No
NPI: 1861491490

 Website: <http://palomarvista.com>

Credentials and/or
certifications:



 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

VALLE VISTA POST ACUTE


Provider ID: 171968

 1025 W 2ND AVE
ESCONDIDO, CA 92025
 Phone: (760) 745-1842

Fax: (760) 745-4346

 After Hours Phone: (760)
745-1842

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1659369262

 Website: www.covenantcare.com

Credentials and/or
certifications:

 Site English Spoken: Y
Cultural Competency: N



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING


Provider ID: 298744

 325 POTTER ST
FALLBROOK, CA 92028
 Phone: (760) 728-2330

Fax: (909) 863-4644

 After Hours Phone: (760)
728-2330

Accepting New Patients: No


 Hours: M-F
8:00AM-5:00PM

NPI: 1265823264

 Website: www.progressivecarecenters.com

Credentials and/or
certifications:

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VIA RIO HOUSE

Provider ID: 662930

 1262 VIA ENCINOS DR
FALLBROOK, CA 92028

 Phone: (760) 547-1976

Fax: (760) 721-9872

 After Hours Phone: (760)
547-1976

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

 2552 TORREY PINES RD
LA JOLLA, CA 92037

 Phone: (858) 453-5810

Fax: (858) 214-1212



 After Hours Phone: (858)
453-5810

Accepting New Patients: No







 Hours: M-F

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)


8:00AM-5:00PM
NPI: 1457486078
 Website: www.covenantcare.com
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: , Spanish
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





THE COVE AT LA JOLLA

Provider ID: 305514
 7160 FAY AVE
LA JOLLA, CA 92037
 Phone: (858) 459-4361
 After Hours Phone: (858) 459-4361
Accepting New Patients: No
 Hours: M-F 7:30AM-4:00PM
NPI: 1588067482
 Website: <http://thecoveatla.com>
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






LA MESA

ARBOR HILLS NURSING CENTER






Provider ID: 172007
 7800 PARKWAY DR

LA MESA, CA 91942
 Phone: (619) 460-2330
 After Hours Phone: (619) 460-2330
Accepting New Patients: No
NPI: 1356345706
 Website: www.lifegen.net/arborshills/
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish, Russian
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CARE MERIDIAN LA MESA

Provider ID: 173379
 5640 AZTEC DR
LA MESA, CA 91942
 Phone: (949) 263-6632
Fax: (619) 465-0019
 After Hours Phone: (949) 263-6632
Accepting New Patients: No
NPI: 1235404674
 Website: www.neurorestorative.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023
 5696 LAKE MURRAY BLVD
LA MESA, CA 91942
 Phone: (619) 460-7871
 After Hours Phone: (619) 460-7871
Accepting New Patients: No
NPI: 1457345001
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643
 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4110
 After Hours Phone: (619) 740-4110
Accepting New Patients: No
NPI: 1417930249
 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

GROSSMONT POST ACUTE

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

CARE

Provider ID: 310488

8787 CENTER DR
LA MESA, CA 91942

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)
460-4444

Accepting New Patients: No

NPI: 1689077588

Website: <http://grossmontpostacute.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

HILLDALE HABILITATION CENTER

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1073736427

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

LA MESA HEALTHCARE CTR

Provider ID: 172022

3780 MASSACHUSETTS
AVE

LA MESA, CA 91941

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)
465-1313

Accepting New Patients: No

NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: No

Hours: M-TH
9:00AM-5:00PM
F 5:00AM-5:00PM

NPI: 1174926448

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Farsi, Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)
644-1000

Accepting New Patients: No

NPI: 1760709687

Website: www.bellavistahealth.com

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 463-0294



Fax: (619) 461-1064


After Hours Phone: (619)
463-0294


Accepting New Patients: No


NPI: 1336134204


D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)


 Website: <http://lemongrovecare.com>
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


791-7700
 Accepting New Patients: No
 Hours: M-F
 9:00AM-5:00PM
 NPI: 1235133687

Fax: (619) 474-1925
 After Hours Phone: (619) 474-6741
 Accepting New Patients: No
 NPI: 1730176538

 Website: www.lifegen.net/friendshipmanor/
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N

 Website: www.windsorcare.com
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N




American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


NATIONAL CITY


CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

 541 S V AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 791-7900
 After Hours Phone: (619) 791-7900




Accepting New Patients: No
 NPI: 1497759856

 Website: www.lifegen.net/castlemanor/index.html
 Credentials and/or certifications:

Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER




FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973


 902 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 791-7700
 Fax: (619) 791-7791
 After Hours Phone: (619)


PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

 2575 E 8TH ST
 NATIONAL CITY, CA 91950
 Phone: (619) 470-6700
 After Hours Phone: (619) 470-6700



Accepting New Patients: No
 NPI: 1275513293

 Website: <http://pvhcc.com>
 Credentials and/or certifications:

Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV CTR OF SAN DIEGO




Provider ID: 172011

 220 E 24TH ST
 NATIONAL CITY, CA 91950
 Phone: (619) 474-6741


OCEANSIDE


LA PALOMA HEALTHCARE CTR

Provider ID: 172021

 3232 THUNDER DR
 OCEANSIDE, CA 92056
 Phone: (760) 724-2193
 After Hours Phone: (760) 724-2193

Accepting New Patients: No
 NPI: 1265462436

 Website: WWW.LAPALOMAHEALTHCARE.COM
 Credentials and/or certifications:

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Armenian, Korean, Tagalog
 Cultural Competency: N
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MICHALOWSKI HOME

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987

12696 MONTE VISTA RD
POWAY, CA 92064

Phone: (858) 487-6242

Fax: (858) 487-4282

After Hours Phone: (858)
487-6242

Accepting New Patients: No
Hours: M-F
8:00AM-5:30PM

NPI: 1073902672
Website: [http://bouldercre
ekpa.com](http://bouldercre
ekpa.com)
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY HEALTHCARE CENTER

Provider ID: 171989

15632 POMERADO RD
POWAY, CA 92064

Phone: (858) 485-5153

Fax: (858) 485-7694

After Hours Phone: (858)
485-5153

Accepting New Patients: No
NPI: 1407035512

Website: [http://powaycare.
com](http://powaycare.
com)
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THE VILLAS AT POWAY

Provider ID: 172642

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4545

After Hours Phone: (858)
613-4545

Accepting New Patients: No
NPI: 1619947090

Website: [www.palomarheal
th.org/skilled-
nursing/villa-
pomerado](http://www.palomarheal
th.org/skilled-
nursing/villa-
pomerado)
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

8885 RIO SAN DIEGO DR
STE 131

SAN DIEGO, CA 92108

Phone: (619) 293-3500

Fax: (619) 704-2054

After Hours Phone: (619)
293-3500

Accepting New Patients: No
Hours: M-F
8:00AM-5:00PM

NPI: 1083039861

Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

Cultural Competency: N


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

ARROYO VISTA NURSING CTR

Provider ID: 172028


 3022 45TH ST
SAN DIEGO, CA 92105

 *Phone: (619) 283-5855*

Fax: (619) 284-6327

 *After Hours Phone: (619)
283-5855*

Accepting New Patients: No

 *Hours: SU-SA
9:00AM-5:00PM*

NPI: 1487640066

 *Website: <http://arroyovistacare.com>*


*Credentials and/or
certifications:*

Site English Spoken: Y

*Site Languages(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog*

Cultural Competency: N


*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*

BALBOA NURSING AND REHAB CTR


Provider ID: 416840

 3520 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 291-5270*

 *After Hours Phone: (619)
291-5270*

*Accepting New Patients: No
NPI: 1578521274*

 *Website: <http://balboahc.com>*

*Credentials and/or
certifications:*

Site English Spoken: Y

*Site Languages(s) Spoken:
Mandarin, Spanish,
Tagalog, Vietnamese*

Cultural Competency: N


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

BRIGHTON PLACE SAN DIEGO

Provider ID: 402624

 1350 EUCLID AVE
SAN DIEGO, CA 92105

 *Phone: (619) 263-2166*

Fax: (619) 264-9231

 *After Hours Phone: (619)
263-2166*

Accepting New Patients: No

NPI: 1346258274

 *Website: N/A*

*Credentials and/or
certifications:*

Site English Spoken: Y

Cultural Competency: N


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128

 *Phone: (858) 673-0101*

Fax: (858) 673-8320

 *After Hours Phone: (858)
673-0101*

*Accepting New Patients: No
NPI: 1083727093*

 *Website: <http://carmelmountain.net>*

*Credentials and/or
certifications:*

Site English Spoken: Y

*Site Languages(s) Spoken:
Tagalog, Armenian,
Mandarin, Spanish, Russian,
Korean, Vietnamese*

Cultural Competency: N


*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

GOLDEN HILL POST ACUTE

Provider ID: 614821


 1201 34TH ST
SAN DIEGO, CA 92102

 *Phone: (619) 232-2946*

Fax: (619) 702-7358

 *After Hours Phone: (619)
232-2946*

*Accepting New Patients: No
NPI: 1598229437*


 *Website: N/A*
*Credentials and/or
certifications:*

Site English Spoken: Y

*Site Languages(s) Spoken:
Spanish, Tagalog*

Cultural Competency: N

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

HILLCREST HEIGHTS

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

HEALTHCARE CENTER

Provider ID: 509489

4033 6TH AVE
SAN DIEGO, CA 92103

Phone: (619) 297-4086

Fax: (619) 297-9238

After Hours Phone: (619)
297-4086

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1558825067

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

JACOB HEALTH CARE CENTER LLC

Provider ID: 172617

4075 54TH ST
SAN DIEGO, CA 92105

Phone: (619) 582-5168

Fax: (619) 325-0194

After Hours Phone: (619)
582-5168

Accepting New Patients: No

NPI: 1881684900

Website: www.jacobhealthcare.com

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

3680 REYNARD WAY
SAN DIEGO, CA 92103

Phone: (619) 297-4484

Fax: (855) 214-6992

After Hours Phone: (619)
297-4484

Accepting New Patients: No

NPI: 1669875563

Website: <http://missionhillspostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

RADY CHILDRENS

CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)
966-5833

Accepting New Patients: No

NPI: 1992881478

Website: www.rchsd.org

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST
SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)
475-2211

Accepting New Patients: No
NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ST PAULS HEALTH CARE CENTER

Provider ID: 288531

235 NUTMEG ST
SAN DIEGO, CA 92103

Phone: (619) 677-3895

After Hours Phone: (619)
677-3895

Accepting New Patients: No
NPI: 1972619104

Website: N/A
Credentials and/or

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

certifications: CMS

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

THE PAVILION AT OCEAN POINT

Provider ID: 262151

📍 3202 DUKE ST
SAN DIEGO, CA 92110

☎ Phone: (619) 224-4141

📞 After Hours Phone: (619) 224-4141

Accepting New Patients: No

NPI: 1538174990

🌐 Website: N/A
Credentials and/or

certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

📍 3884 NOBEL DR
SAN DIEGO, CA 92122

☎ Phone: (858) 625-8700

Fax: (858) 625-8777

📞 After Hours Phone: (858) 625-8700

Accepting New Patients: No

NPI: 1003198342

🌐 Website: N/A
Credentials and/or

certifications:

☐ Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

UNIVERSITY CARE CENTER

Provider ID: 172024

📍 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 583-1993

Fax: (619) 501-3559

📞 After Hours Phone: (619) 583-1993

Accepting New Patients: No

NPI: 1871522672

🌐 Website: <http://universitycarecenter.com>

Credentials and/or
certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

📍 15720 BERNARDO CENTER DR
SAN DIEGO, CA 92127

☎ Phone: (858) 672-3900

Fax: (858) 672-9247

📞 After Hours Phone: (858) 672-3900

Accepting New Patients: No

NPI: 1518063437

🌐 Website: www.villaranchobernardo.com

Credentials and/or
certifications:

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

📍 1201 34TH ST
SAN DIEGO, CA 92102

☎ Phone: (619) 232-2946

Fax: (310) 595-3529

📞 After Hours Phone: (619) 232-2946

Accepting New Patients: No

NPI: 1811963028

🌐 Website: <https://windsorgoldenhill.com>

Credentials and/or
certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

SAN MARCOS

CARLO HOUSE

Provider ID: 662931

📍 411 CARLO ST
SAN MARCOS, CA 92078

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

☎ Phone: (760) 721-1706

Fax: (760) 721-9872

📞 After Hours Phone: (760) 721-1706

Accepting New Patients: No
NPI: 1962488007

🌐 Website: N/A
Credentials and/or
certifications:

🗣 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

SANTEE

STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994

📍 8778 CUYAMACA ST
SANTEE, CA 92071

☎ Phone: (619) 449-5555

📞 After Hours Phone: (619) 449-5555

Accepting New Patients: No

🕒 Hours: SU-SA
8:00AM-5:00PM

NPI: 1184628554

🌐 Website: www.lifegen.net/Stanfordcourt/

Credentials and/or
certifications:

🗣 Site English Spoken: Y

🗣 Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233

📍 8625 LAMAR ST
SPRING VALLEY, CA 91977

☎ Phone: (323) 326-6186

Fax: (619) 461-3575

📞 After Hours Phone: (323) 326-6186

Accepting New Patients: No
NPI: 1518974542

🌐 Website: N/A

Credentials and/or
certifications:

🗣 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094

📍 9009 CAMPO RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 460-2711

Fax: (619) 460-0451

📞 After Hours Phone: (619) 460-2711

Accepting New Patients: No
NPI: 1780682021

🌐 Website: N/A

Credentials and/or
certifications:

🗣 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

📍 325 KEMPTON ST
SPRING VALLEY, CA 91977

☎ Phone: (619) 931-1151

Fax: (224) 233-1397

📞 After Hours Phone: (619) 931-1151

Accepting New Patients: No

🕒 Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

🌐 Website: www.mountmiguelcovenantvillage.org

Credentials and/or
certifications:

🗣 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

📍 325 KEMPTON ST
SPRING VALLEY, CA 91977

☎ Phone: (619) 931-1151

Fax: (224) 233-1397

📞 After Hours Phone: (619) 931-1151

Accepting New Patients: No

🕒 Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

🌐 Website: covlivingmountmi

D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

guel.org
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588
 13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
 Phone: (760) 751-9879
Fax: (760) 749-3019
 After Hours Phone: (760)
751-9879
Accepting New Patients: No
NPI: 1700160405
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VISTA

ANZA HOUSE

Provider ID: 662920
 1736 ANZA AVE
VISTA, CA 92084
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER

GRACE HOUSE

Provider ID: 662919
 2507 HIBISCUS AVE
VISTA, CA 92081
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LA FUENTE POST ACUTE

Provider ID: 429590
 247 E BOBIER DR
VISTA, CA 92084
 Phone: (760) 945-3033
 After Hours Phone: (760)
945-3033
Accepting New Patients: No
 Hours: SU-SA
8:30AM-5:00PM

NPI: 1366802696
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LIFE CARE CENTER OF VISTA



Provider ID: 171970
 304 N MELROSE DR
VISTA, CA 92083
 Phone: (760) 724-8222
Fax: (760) 941-4870
 After Hours Phone: (760)
724-8222
Accepting New Patients: No
 Hours: SU-SA
9:00AM-5:00PM
NPI: 1811942063
 Website: www.lcca.com
Credentials and/or
certifications:
 Site English Spoken: Y
 Site Language(s) Spoken:
Tagalog
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MARSHALL HOUSE






Provider ID: 662924
 758 S MELROSE DR
VISTA, CA 92081
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)

D5. 長期服務與支援 (LTSS) 服務提供者




I. 長期護理 (LTC) 和熟練護理機構 (SNF)



721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MONTGOMERY HOUSE






Provider ID: 662927
 1658 MONTGOMERY DR
VISTA, CA 92084
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

ORIENTE HOUSE





Provider ID: 662928
 3081 ORIENTE DR
VISTA, CA 92084
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No

NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SUSAN PARHAM HOUSING CORPORATION






Provider ID: 662929
 1658 ANZA AVE
VISTA, CA 92084
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No
NPI: 1093137762
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

VISTA HEALTHCARE CENTER



Provider ID: 171990
 247 E BOBIER DR
VISTA, CA 92084
 Phone: (760) 945-3033
Fax: (760) 724-3169
 After Hours Phone: (760)
945-3033
Accepting New Patients: No
 Hours: M-F

8:00AM-5:00PM
NPI: 1912189812
 Website: <http://astorhealth.com>
Credentials and/or
certifications:
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


VISTA HOUSE

Provider ID: 662916
 1768 MONTE MAR RD
VISTA, CA 92084
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760)
721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or
certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017
 2000 WESTWOOD RD
VISTA, CA 92083
 Phone: (760) 630-2273
Fax: (760) 630-0913


D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)

 *After Hours Phone: (760)
630-2273*

Accepting New Patients: No

 *Hours: SU-SA
8:30AM-5:00PM*

NPI: 1275533929

 *Website: <http://vistaknoll.com>*

*Credentials and/or
certifications:*

Site English Spoken: Y

*Site Languages(s) Spoken:
Korean, Tagalog,
Vietnamese, Spanish*

Cultural Competency: N

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

D5. 長期服務與支援 (LTSS) 服務提供者


II. 縣居家支援服務 (IHSS)

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


License Number: 1710308986

Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

D5. 長期服務與支援 (LTSS) 服務提供者

III. 基於社群的成人服務 (CBAS) - 成人日間服務

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619)
420-1404

Accepting New Patients: No

Hours: M-F
7:00AM-3:00PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://openarmsa.dhc.com>

EL CAJON

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619)
328-2112

Accepting New Patients: No

Hours: SU-SA
9:00AM-3:00PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: N/A

MAGNOLIA ADULT DAY

HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619)
444-1522

Accepting New Patients: No

Hours: M-F
8:00AM-4:00PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://magnoliaa>

dhc.com

WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 631-7222

After Hours Phone: (619)
631-7222

Accepting New Patients: No

Hours: M-F
8:00AM-3:30PM

NPI: 1821125550

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <https://sites.google.com/site/westernadhec/contact-us>

LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502

9158 FLETCHER PKWY
LA MESA, CA 91942

Phone: (619) 357-7753

Fax: (619) 439-6038

After Hours Phone: (619)
357-7753

Accepting New Patients: No

NPI: 1093921900

Accessibility: CONTACT
PROVIDER

D5. 長期服務與支援 (LTSS) 服務提供者

III. 基於社群的成人服務 (CBAS) - 成人日間服務

American Sign Language (ASL): Provider ID: 404183

N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English

Languages: N

Website: N/A

NATIONAL CITY

HORIZON CBAS

Provider ID: 642082

1035 HARBISON AVE
NATIONAL CITY, CA 91950

Phone: (619) 474-1822

Fax: (619) 474-1826

After Hours Phone: (619)
474-1822

Accepting New Patients: No
License Number: 060000582

NPI: 1396476388

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English

Languages: N

Website: N/A

POWAY

POWAY ADULT DAY HEALTH CARE CENTER

12250 CROSTHWAITE CIR
POWAY, CA 92064

Phone: (858) 748-5044

Fax: (858) 748-5405

After Hours Phone: (858)
748-5044

Accepting New Patients: No
License Number: 60000822

NPI: 1568659977

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English

Languages: N

Website: N/A

SAN DIEGO

SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018

4428 CONVOY ST STE 288
SAN DIEGO, CA 92111

Phone: (858) 244-4555

Fax: (858) 724-3302

After Hours Phone: (858)
244-4555

Accepting New Patients: No
Site Languages(s) Spoken:

Vietnamese, Mandarin,
Spanish

Hours: M-F
8:00AM-5:00PM

License Number: 550005837

NPI: 1396201828

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: Y

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English

Languages: Y

Website: Sandiegofamilycircle.com

LOVING CARE ADHC

Provider ID: 419961

2565 CAMINO DEL RIO S
STE 201

SAN DIEGO, CA 92108

Phone: (619) 718-9777

Fax: (619) 569-2855

After Hours Phone: (619)
718-9777

Accepting New Patients: No

Hours: SU-SA
8:30AM-4:00PM

NPI: 1346455961

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English

Languages: N

Website: www.lovingcareadhc.com


D5. 長期服務與支援 (LTSS) 服務提供者


III. 基於社群的成人服務 (CBAS) - 成人日間服務

CASA PACIFICA ADHCC

Provider ID: 417303

 1424 30TH ST STE C
SAN DIEGO, CA 92154

 Phone: (619) 424-8181

 After Hours Phone: (619)
424-8181

Accepting New Patients: No

NPI: 1609920305

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

 Website: www.casa- pacific
a.com

Language line interpreter
services: N

Cultural Competency: N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

 Website: www.americaread
hc.com


SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER

Provider ID: 420060

 340 RANCHEROS DR STE
196

SAN MARCOS, CA 92069

 Phone: (760) 682-2424

Fax: (760) 471-5104

 After Hours Phone: (760)
682-2424

Accepting New Patients: No

License Number: 060000832

NPI: 1528271186

 Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N

D6. 心理健康名錄

ALPINE

KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302

NPI: 1841744208

Provider English Spoken: Y

Arabic

Cultural Competency: N

AMMAR KHALEEL

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

CELAYA, PATRICIA

Provider Gender: Female

License Number: PSY33233

NPI: 1952656902

Provider English Spoken: Y
Spanish

Cultural Competency: N

PATRICIA E CELAYA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

GALLO, LINDA

Provider Gender: Female

License Number: PSY27375

NPI: 1427773621

Provider English Spoken: Y

Cultural Competency: N

LINDA C GALLO

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7852

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

GOULD, HILARY

Provider Gender: Female

License Number: PSY31088

NPI: 1104297696

Provider English Spoken: Y

Cultural Competency: N

HILARY GOULD

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 271-0260

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

CHULA VISTA

BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904

NPI: 1649429150

Provider English Spoken: Y

Cultural Competency: N

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-6941

After Hours Phone: (619)


D6. 心理健康名錄

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

JUAREZ, AMERICA

Provider Gender: Female


License Number: LCS92516

NPI: 1386281541


Provider English Spoken: Y

Cultural Competency: N

AMERICA P JUAREZ

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

KURZ, TROY

Provider Gender: Male


License Number: A157190

NPI: 1154862357


Provider English Spoken: Y

Cultural Competency: N


TROY L KURZ


 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-6941

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-4:00PM

MALAK, LAWRENCE

Provider Gender: Male


License Number: A115345

NPI: 1467773028


Provider English Spoken: Y

Cultural Competency: N


LAWRENCE T MALAK

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female


License Number: A152787

NPI: 1699126367


Provider English Spoken: Y
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 271-0260

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

OJHA, PRITI

Provider Gender: Female


License Number: A139807

NPI: 1760897284


Provider English Spoken: Y

Cultural Competency: N

PRITI OJHA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


D6. 心理健康名錄

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-TU 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:00PM

SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495


NPI: 1558895342

Provider English Spoken: Y
Spanish

Cultural Competency: N

SEBASTIAN L SHIELDS


 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101


NPI: 1326484437


Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER


 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE

Provider Gender: Male

License Number: PSY25044


NPI: 1932358355


Provider English Spoken: Y

Cultural Competency: N

IMANIE S WIJAYARATNE


 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 271-0260

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

EL CAJON

ARAIZA, ERNESTINA

Provider Gender: Female

License Number: PSY32549


NPI: 1568608636

Provider English Spoken: Y

Cultural Competency: N

ERNESTINA ARAIZA


 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100
Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ARNOLD, REBECCA

Provider Gender: Female

License Number: MFC95778


NPI: 1225580350


Provider English Spoken: Y

Cultural Competency: N




REBECCA L ARNOLD

 855 E MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 440-0251
Fax: (858) 633-4692




 After Hours Phone: (619)
440-0251

D6. 心理健康名錄

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER







CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Cultural Competency: N
SHANNON K CASEY

 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CRUZ, GUADALUPE






Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y
Spanish
Cultural Competency: N
GUADALUPE A CRUZ

 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






DIA, ALI

Provider Gender: Male
License Number: A47803
NPI: 1912031030
Provider English Spoken: Y
Arabic
Cultural Competency: N






ALI R DIA

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM

FRAGOSO, DOMINIQUE

Provider Gender: Female
License Number: LCS12601
NPI: 1518521830
Provider English Spoken: Y
Cultural Competency: N
DOMINIQUE C FRAGOSO
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GUARDADO-SOTO, RAQUEL

Provider Gender: Female
License Number: PSY26883
NPI: 1194999276
Provider English Spoken: Y
Cultural Competency: N
RAQUEL GUARDADO-SOTO
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (858) 633-4692
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

D6. 心理健康名錄

American Sign Language (ASL): Fax: (619) 590-9036

N

 Accessibility: CONTACT PROVIDER

KOH, STEVE

Provider Gender: Male

License Number: A103468


NPI: 1467650473

Provider English Spoken: Y
Korean

Cultural Competency: N

STEVE H KOH

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

MAXWELL, MELISSA

Provider Gender: Female


License Number: LCS90791


NPI: 1275182826


Provider English Spoken: Y
Cultural Competency: N

MELISSA K MAXWELL


 215 W MADISON AVE
EL CAJON, CA 92020

 Phone: (619) 667-6125

 After Hours Phone: (619)
667-6125

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ORLANDO, FRANCESCA

Provider Gender: Female


License Number: LCS107210

NPI: 1275097081

Provider English Spoken: Y
Cultural Competency: N

FRANCESCA A ORLANDO

 215 W MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 401-6236

Fax: (619) 590-9036

 After Hours Phone: (619)
401-6236

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female


License Number: A88938


NPI: 1750566915

Provider English Spoken: Y

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (858) 633-4692

 After Hours Phone: (619)
440-2751


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

WEAVER, AMANDA


Provider Gender: Female


License Number: MFC105361

NPI: 1174266423

Provider English Spoken: Y
Cultural Competency: N

AMANDA R WEAVER

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D6. 心理健康名錄

WHEELER, KIM

Provider Gender: Female
License Number: PSY34237
NPI: 1700577434
Provider English Spoken: Y
Cultural Competency: N

KIM N WHEELER

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 11\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ENCINITAS

GARCIA, ROSEMARIE

Provider Gender: Female
License Number: MFC123590
NPI: 1710410980
Provider English Spoken: Y
Cultural Competency: N

ROSEMARIE C GARCIA

1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

GOMEZ, JUANITA

Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Cultural Competency: N

JUANITA GOMEZ

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LOPEZ, JOANNA

Provider Gender: Female
License Number: MFC50381
NPI: 1275664385
Provider English Spoken: Y
Cultural Competency: N

JOANNA M LOPEZ

1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ESCONDIDO

ARLINGHAUS, RENE

Provider Gender: Female
License Number: LCS80909
NPI: 1568973964
Provider English Spoken: Y
Cultural Competency: N

RENE M ARLINGHAUS

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT

D6. 心理健康名錄

PROVIDER
Hours: M-F
8:00AM-5:00PM

BECERRA, GABRIEL

Provider Gender: Male
License Number: LCS114743
NPI: 1205313319
Provider English Spoken: Y
Spanish

Cultural Competency: N

GABRIEL CELESTINO

BECERRA

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175
NPI: 1760867824
Provider English Spoken: Y
Spanish

Cultural Competency: N

MARIA T BELINSKY

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Phone: (760) 737-6900
Fax: (760) 520-8100

After Hours Phone: (760)
737-6900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175
NPI: 1760867824

Provider English Spoken: Y
Spanish

Cultural Competency: N

MARIA T BELINSKY

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y
Spanish

Cultural Competency: N

MARIA T BELINSKY

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100
Fax: (858) 633-4691

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARLTON PENN, CORNELIA

Provider Gender: Female

License Number: PSY14310

NPI: 1891720611

Provider English Spoken: Y
German

Cultural Competency: N

CORNELIA J CARLTON-PENN

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish


TDD: U

D6. 心理健康名錄

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

CASTILLO, TIFFANY

Provider Gender: Female

License Number: A158480


NPI: 1114459252


Provider English Spoken: Y
Spanish

Cultural Competency: N

TIFFANY A CASTILLO

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8340
Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

CASTILLO, TIFFANY

Provider Gender: Female

License Number: A158480


NPI: 1114459252

Provider English Spoken: Y
Spanish


Cultural Competency: N


TIFFANY A CASTILLO

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340


Fax: (360) 462-2752

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

CHRISTENSEN, PATTI

Provider Gender: Female

License Number: LCS24129


NPI: 1245434745


Provider English Spoken: Y

Cultural Competency: N

PATTI J CHRISTENSEN

 1002 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (760) 741-2660

 After Hours Phone: (760)
741-2660

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:30AM-5:00PM

DOCKERY, LEE

Provider Gender: Male


License Number: A178136

NPI: 1225526320

Provider English Spoken: Y
Cultural Competency: N

LEE M DOCKERY

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

ESTRADA PATINO, ANGELA

Provider Gender: Female

License Number: PSY31789


NPI: 1629339015

Provider English Spoken: Y
Spanish

Cultural Competency: N

ANGELA J ESTRADA PATINO






 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (760) 466-1373

 After Hours Phone: (760)







D6. 心理健康名錄

520-8100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM






FU, KATHERINE



Provider Gender: Female
License Number: A187562
NPI: 1356877807
Provider English Spoken: Y
Cultural Competency: N

KATHERINE FU




 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM



GUZZO, RICHARD

Provider Gender: Male
License Number: LCS8288
NPI: 1497898431
Provider English Spoken: Y
Cultural Competency: N
RICHARD L GUZZO
 1002 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 737-6960
 After Hours Phone: (760)
737-6960
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N









 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:00PM

HARRIS, LAURA

Provider Gender: Female
License Number: LCS18214
NPI: 1255640280
Provider English Spoken: Y
Cultural Competency: N
LAURA S HARRIS
 1002 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 741-2660
Fax: (760) 741-2647
 After Hours Phone: (760)
741-2660
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM





KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732
Provider English Spoken: Y
Cultural Competency: N
NISHAT KULKARNI
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

MAGOS, DANIEL

Provider Gender: Male
License Number: LCS88270
NPI: 1578983664
Provider English Spoken: Y
Cultural Competency: N
DANIEL K MAGOS

D6. 心理健康名錄

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300
 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019


NPI: 1669808267

Provider English Spoken: Y

Cultural Competency: N

NORAYMA MARTINEZ

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938


NPI: 1750566915

Provider English Spoken: Y

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PRASAD, AMITHA

Provider Gender: Female

License Number: A158657

NPI: 1821436882


Provider English Spoken: Y

Cultural Competency: N

AMITHA, PRASAD

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 294-9270

Fax: (760) 294-9268

 After Hours Phone: (760)
294-9270

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

PRATHER, ALLYSON

Provider Gender: Female

License Number: MFC45441


NPI: 1083725006

Provider English Spoken: Y

Cultural Competency: N

ALLYSON M PRATHER

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300


Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

RIOS, SIERRA

Provider Gender: Female

License Number: LCS91970

NPI: 1942746128

Provider English Spoken: Y

Spanish

Cultural Competency: N

D6. 心理健康名錄

SIERRA K RIOS

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760)
520-8340
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ROBLEDO, DAMIAN

Provider Gender: Male

License Number: LCS66152

NPI: 1376831289

Provider English Spoken: Y
Spanish

Cultural Competency: N

DAMIAN ROBLEDO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760)
520-8340
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y
Spanish

Cultural Competency: N

GABRIEL RODARTE

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760)
520-8340
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

STONE, CALVIN

Provider Gender: Male

License Number: 20A18127

NPI: 1275995870

Provider English Spoken: Y
Cultural Competency: N

CALVIN T STONE

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131

Provider English Spoken: Y
Cultural Competency: N

KYLE A STREET

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760)
520-8300
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SUOZZO, JOSEPH

D6. 心理健康名錄

Provider Gender: Male
License Number: PSY18393
NPI: 1821013228

Provider English Spoken: Y
Cultural Competency: N
JOSEPH M SUOZZO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340
Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female
License Number: PSY31075
NPI: 1932308442

Provider English Spoken: Y
Cultural Competency: N

ALYSSA TEETER-WITT

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female
License Number: PSY31075
NPI: 1932308442

Provider English Spoken: Y
Cultural Competency: N

ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

THOMAS, PAULA

Provider Gender: Female
License Number: LCS29517
NPI: 1821389966

Provider English Spoken: Y
Cultural Competency: N

PAULA M THOMAS

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, German, French,
Cappadocian Greek, Hindi

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TIZNADO, MONICA

Provider Gender: Female
License Number: MFC81074
NPI: 1497895197

Provider English Spoken: Y
Spanish

Cultural Competency: N
MONICA M TIZNADO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340
Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TIZNADO, MONICA

Provider Gender: Female
License Number: MFC81074

D6. 心理健康名錄

NPI: 1497895197

Provider English Spoken: Y
Spanish

Cultural Competency: N

MONICA M TIZNADO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:

German, Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VAQUERO, JUANA

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708

Provider English Spoken: Y

Cultural Competency: N

JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VENNAM, VAMSI

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y

Cultural Competency: N

VAMSI K VENNAM

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

WOODWORTH, JENNIFER

D6. 心理健康名錄

Provider Gender: Female
License Number: PSY26963
NPI: 1639362494

Provider English Spoken: Y
Cultural Competency: N

JENNIFER WOODWORTH

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FALLBROOK

CARDOZA, CLAUDIA

Provider Gender: Female
License Number: LCS82778
NPI: 1871084715

Provider English Spoken: Y
Spanish

Cultural Competency: N

CLAUDIA J CARDOZA

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 457-4700

After Hours Phone: (760)
451-4730

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:

Spanish

TDD: U

Min/Max Age: 6\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

GILROY, LAURA

Provider Gender: Female

License Number: LCS27123

NPI: 1437427978

Provider English Spoken: Y

Cultural Competency: N

LAURA L GILROY

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MAGEE, ANNA

Provider Gender: Female

License Number: LCS107407

NPI: 1194234609

Provider English Spoken: Y

Cultural Competency: N

ANNA M MAGEE

1328 S MISSION RD

FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MCAULEY, ROBERT

Provider Gender: Male

License Number: G23317

NPI: 1194881888

Provider English Spoken: Y

Cultural Competency: N

ROBERT A MCAULEY

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4730

Fax: (760) 457-4700

After Hours Phone: (760)
451-4730

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MILES, RENEE

Provider Gender: Female

License Number: LCS70204

NPI: 1053763623

D6. 心理健康名錄

Provider English Spoken: Y

Cultural Competency: N

RENEE S MILES

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760)
451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y
Spanish

Cultural Competency: N

GABRIEL RODARTE

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 541-4730

Fax: (760) 457-4700

After Hours Phone: (760)
541-4730

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

IMPERIAL BEACH

GONZALEZ, CLAUDIA

Provider Gender: Female

License Number: LCS100328

NPI: 1770055543

Provider English Spoken: Y

Cultural Competency: N

CLAUDIA GONZALEZ

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ZUREK, BEDEANIA

Provider Gender: Female

License Number: LCS74215

NPI: 1942375811

Provider English Spoken: Y

Cultural Competency: N

BEDEANIA R ZUREK

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LA JOLLA

BAILIS, JESSICA

Provider Gender: Female

License Number: PSY27537

NPI: 1760739049

Provider English Spoken: Y

Cultural Competency: N

JESSICA R BAILIS

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH

9300 CAMPUS POINT DR

D6. 心理健康名錄

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

BOOTH, CHRISTOPHER

Provider Gender: Male
License Number: PSY26073
NPI: 1568893162
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER R BOOTH
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI

Provider Gender: Male
License Number: PSY21823
NPI: 1780620906
Provider English Spoken: Y
Cultural Competency: N
KERRI N BOUTELLE
📍 8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
☎ Phone: (858) 246-1654
📞 After Hours Phone: (858) 246-1654
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI

Provider Gender: Male
License Number: PSY21823
NPI: 1780620906
Provider English Spoken: Y
Cultural Competency: N
KERRI N BOUTELLE
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI


Provider Gender: Male
License Number: PSY21823
NPI: 1780620906
Provider English Spoken: Y
Cultural Competency: N
KERRI N BOUTELLE
📍 3344 N TORREY PINES CT
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

BRAR, SIMERJEET

Provider Gender: Female
License Number: A144765
NPI: 1417393307
Provider English Spoken: Y
Cultural Competency: N
SIMERJEET K BRAR
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

D6. 心理健康名錄

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290


NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

CLAUDAT, KIMBERLY

Provider Gender: Female

License Number: PSY28581


NPI: 1699200949

Provider English Spoken: Y

Cultural Competency: N


KIMBERLY B CLAUDAT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

CRANDAL, BRENT

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452


Provider English Spoken: Y

Cultural Competency: N

BRENT R CRANDAL

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8372

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227


NPI: 1093119364


Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364


Provider English Spoken: Y


Cultural Competency: N


KRISTEN L DUARTE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A


D6. 心理健康名錄


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366


Provider English Spoken: Y

Cultural Competency: N

DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037


 Phone: (858) 246-1654

Fax: (858) 246-3181

 After Hours Phone: (858)
246-1654

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823


NPI: 1861043366

Provider English Spoken: Y

Cultural Competency: N

DAWN M EICHEN

 3344 N TORREY PINES CT
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366


Provider English Spoken: Y

Cultural Competency: N

DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

ELLEDDGE, LINDSAY

Provider Gender: Female

License Number: LCS96136

NPI: 1619428828


Provider English Spoken: Y

Cultural Competency: N

LINDSAY E ELLEDGE

 8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FINN, DAPHNA

Provider Gender: Female

License Number: A152291

NPI: 1639522725


Provider English Spoken: Y

Cultural Competency: N


DAPHNA M FINN

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

D6. 心理健康名錄

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male

License Number: C141122

NPI: 1598716367

Provider English Spoken: Y

Cultural Competency: N

STEVEN F HUEGE

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

HUEGE, STEVEN

Provider Gender: Male

License Number: C141122

NPI: 1598716367

Provider English Spoken: Y

Cultural Competency: N

STEVEN F HUEGE

📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119

Provider English Spoken: Y

Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

LASSWELL, EVE

Provider Gender: Female

License Number: PSY30220

NPI: 1013483635

Provider English Spoken: Y

Cultural Competency: N

EVE N LASSWELL

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

🌐 Website: N/A

Accepting New Patients: Yes

☐ Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male

License Number: 20A20454

NPI: 1073017315

Provider English Spoken: Y

Cultural Competency: N

ALEX W LEDBETTER




📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273








🕒 After Hours Phone: (800)
926-8273

D6. 心理健康名錄

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER







LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Korean
Cultural Competency: N
DAVID J LEE






 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



LI, XIA

Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y








Mandarin
Cultural Competency: N
XIA LI
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

LINKE, SARAH



Provider Gender: Female
License Number: PSY27116
NPI: 1487026415
Provider English Spoken: Y
Cultural Competency: N
SARAH E LINKE
 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
CHESHER
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 534-7792
Fax: (619) 471-9017
 After Hours Phone: (858) 534-7792
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273

D6. 心理健康名錄

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗉 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MAXWELL, BENJAMIN

Provider Gender: Male

License Number: A108124

NPI: 1740415926

Provider English Spoken: Y

Cultural Competency: N

BENJAMIN K MAXWELL

📍 8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (858) 534-8019

Fax: (858) 534-6727

☎ After Hours Phone: (858) 534-8019

🌐 Website: N/A

Accepting New Patients: Yes

🗉 Site English Spoken: Y
TDD: U

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

Provider English Spoken: Y
Spanish

Cultural Competency: N

ANDRES G MENDEZ

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗉 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

📍 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗉 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 826-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 826-8273

🌐 Website: N/A

Accepting New Patients: Yes

🗉 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Vietnamese


Cultural Competency: N


D6. 心理健康名錄


HOANG A NGUYEN

8:00AM-5:00PM

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 497-6673

 After Hours Phone: (619)
497-6673

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y


Vietnamese


Cultural Competency: N


HOANG A NGUYEN

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

Provider English Spoken: Y


French


Cultural Competency: N

WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (619) 284-3746

 Fax: (888) 579-8781

 After Hours Phone: (619)
284-3746

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220


Provider English Spoken: Y


French


Cultural Competency: N

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

 Phone: (858) 822-5881

 Fax: (888) 539-8781

 After Hours Phone: (858)
822-5881

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556


Provider English Spoken: Y


Cultural Competency: N

KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

 Phone: (800) 926-8372

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556

D6. 心理健康名錄

Provider English Spoken: Y

Cultural Competency: N

KRISTIE L REED

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

9300 MEDIAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376

Provider English Spoken: Y

Cultural Competency: N

ANDRES R SCHNEEBERGER

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403

Provider English Spoken: Y

Cultural Competency: N

STEPHANIE J TARLE

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

TARVER, LESLIE

Provider Gender: Female

License Number: A169181

NPI: 1811300957

Provider English Spoken: Y

Cultural Competency: N

LESLIE B TARVER

8950 VILLA LA JOLLA DR
STE C101

D6. 心理健康名錄

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

WISHNEK, HANNAH

Provider Gender: Female
License Number: LCS105699
NPI: 1578012043
Provider English Spoken: Y
Cultural Competency: N
HANNAH K WISHNEK
📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

ZLATAR, ZVINKA

Provider Gender: Female
License Number: PSY26230
NPI: 1497139059

Provider English Spoken: Y
Spanish
Cultural Competency: N
ZVINKA Z ZLATAR
📍 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

LAKESIDE

BRUNETTO, HEIDI

Provider Gender: Female
License Number: PSY26809
NPI: 1023250453
Provider English Spoken: Y
Cultural Competency: N
HEIDI M BRUNETTO
📍 10039 VINE ST
LAKESIDE, CA 92040
☎ Phone: (619) 390-9975
Fax: (858) 633-4690
🕒 After Hours Phone: (619) 390-9975
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-TH
8:00AM-5:00PM

NATIONAL CITY

FLANIGAN, MARILYN

Provider Gender: Female
License Number: MFC97326
NPI: 1588996912
Provider English Spoken: Y
Cultural Competency: N
MARILYN Y FLANIGAN
📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
☎ Phone: (844) 200-2426
Fax: (858) 578-4417
🕒 After Hours Phone: (844) 200-2426
🌐 Website: N/A
Accepting New Patients: Yes
🗎 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-6:00PM

KUGEL, SAMUEL

Provider Gender: Male
License Number: A54412
NPI: 1497813968
Provider English Spoken: Y
Portuguese, Spanish
Cultural Competency: N

D6. 心理健康名錄

SAMUEL KUGEL

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950

Phone: (619) 472-2600

Fax: (619) 472-5721

After Hours Phone: (619)
472-2600

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Portuguese

TDD: U

Min/Max Age: 18\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

SACHS, MELISSA

Provider Gender: Female

License Number: LCS76968

NPI: 1649760356

Provider English Spoken: Y

Cultural Competency: N

MELISSA R SACHS

2400 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942

NPI: 1932793502

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER J SILVEY

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

OCEANSIDE

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU

8:00AM-5:00PM

D6. 心理健康名錄

W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N

AZUCENA ACOSTA

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

CHALMERS, VIRGINIA

Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Spanish
Cultural Competency: N

VIRGINIA C CHALMERS

619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

D6. 心理健康名錄

☐ *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Spanish

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH*
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ *Phone: (760) 631-5000*

Fax: (760) 414-3892

📞 *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): Spanish

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH*
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ *Phone: (760) 631-5000*

Fax: (760) 414-3892

📞 *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH*
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Cultural Competency: N

WARREN R CHRISTIANSON II

📍 517 N HORNE ST
OCEANSIDE, CA 92054

☎ *Phone: (760) 631-5000*

Fax: (760) 414-3892

📞 *After Hours Phone: (760) 631-5000*

🌐 *Website: N/A*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-TH*
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL

Provider Gender: Female

License Number: PSY15449

NPI: 1750420816

Provider English Spoken: Y

Cultural Competency: N

SHERYL G COOK

📍 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

☎ *Phone: (760) 736-6767*

Fax: (760) 736-8740

📞 *After Hours Phone: (760) 736-6767*

🌐 *Website: N/A*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M 9:00AM-6:15PM*
W 9:00AM-6:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

D6. 心理健康名錄

Cultural Competency: N

VANESSA Y CRUZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686







NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

D6. 心理健康名錄







 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960







Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

JENSEN, BRIAN

Provider Gender: Male
License Number: PSY26041



NPI: 1518138049
Provider English Spoken: Y
Cultural Competency: N
BRIAN M JENSEN
 619 CROUCH ST
OCEANSIDE, CA 92054
 Phone: (760) 566-1620
Fax: (760) 433-4040
 After Hours Phone: (760)
566-1620
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

KRAPES, MICHAEL

Provider Gender: Male
License Number: PSY25077
NPI: 1215233028

Provider English Spoken: Y
Cultural Competency: N

MICHAEL B KRAPES





 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MAUHILI, KENNA

Provider Gender: Female
License Number: PSY23713
NPI: 1386949360

Provider English Spoken: Y
Cultural Competency: N

KENNA M MAUHILI

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM





MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361


Provider English Spoken: Y
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes

D6. 心理健康名錄

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435


NPI: 1356777361

Provider English Spoken: Y
Spanish

Cultural Competency: N

ADRIANA J MENDEZ


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y
Spanish

Cultural Competency: N


ADRIANA J MENDEZ

 4700 N RIVER RD


OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female


License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female


License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female


License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D6. 心理健康名錄

MONTEZ, REBECCA

Provider Gender: Female
License Number: LCS26869
NPI: 1396047809
Provider English Spoken: Y
Spanish

Cultural Competency: N

REBECCA MONTEZ

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 757-5841

Fax: (619) 736-8740

After Hours Phone: (760)
757-5841

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ORTIZ, BEVERLY

Provider Gender: Female
License Number: MFC121355
NPI: 1760826572

Provider English Spoken: Y

Cultural Competency: N

BEVERLY L ORTIZ

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292


Provider English Spoken: Y

Cultural Competency: N


MITESH K PATEL

D6. 心理健康名錄


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093


NPI: 1609450451

Provider English Spoken: Y
Spanish

Cultural Competency: N

ADRIANA SANCHEZ


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093


NPI: 1609450451

Provider English Spoken: Y
Spanish

Cultural Competency: N

ADRIANA SANCHEZ


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

D6. 心理健康名錄

NPI: 1609450451

Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA SANCHEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857

Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female

License Number: LCS74685

NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康名錄

CARLENE WILSON

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732

Provider English Spoken: Y
Cultural Competency: N

NISHAT KULKARNI

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MODHWADIA, MAMTA

Provider Gender: Female
License Number: A113990
NPI: 1043353667

Provider English Spoken: Y
German

Cultural Competency: N

MAMTA D MODHWADIA

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
License Number: A88938
NPI: 1750566915

Provider English Spoken: Y
Cultural Competency: N

ALEJANDRA POSTLETHWAITE

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (858) 633-4688

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

STREET, KYLE

Provider Gender: Male
License Number: 20A21304
NPI: 1457912131

Provider English Spoken: Y

D6. 心理健康名錄

Cultural Competency: N

KYLE A STREET

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax: (858) 633-4688

After Hours Phone: (858)
218-3000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

9:00AM-5:00PM

SAN DIEGO

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536

NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4:00PM

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536

NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 810-8787

Fax: (858) 987-5825

After Hours Phone: (858)
810-8787

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ARONLEE, TRACY

Provider Gender: Female

License Number: LCS83778

NPI: 1619304748

Provider English Spoken: Y

Cultural Competency: N

TRACY S ARONLEE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER



D6. 心理健康名錄

ARONLEE, TRACY

Provider Gender: Female
License Number: LCS83778
NPI: 1619304748

Provider English Spoken: Y
Cultural Competency: N
TRACY S ARONLEE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL): Accepting New Patients: Yes
N



 Accessibility: CONTACT
PROVIDER

BANKS, SARAH



Provider Gender: Female
License Number: PSY30296
NPI: 1164701132



Provider English Spoken: Y
Cultural Competency: N

SARAH J BANKS

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):  Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N



SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM



BANKS, SARAH



Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N

SARAH J BANKS

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BARRON, KAVITA

Provider Gender: Female
License Number: A155596
NPI: 1821418542

Provider English Spoken: Y
Cultural Competency: N



KAVITA BARRON

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BASS, GURGIANA

Provider Gender: Male
License Number: PSY24750
NPI: 1639325277








Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康名錄









GURGIANA BASS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8787
Fax: (858) 987-5825
 After Hours Phone: (858)
810-8787
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER





BRAR, SIMERJEET




Provider Gender: Female
License Number: A144765
NPI: 1417393307
Provider English Spoken: Y
Cultural Competency: N
SIMERJEET K BRAR
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BREEDLOVE, AMANDA









Provider Gender: Female
License Number: MFC139230
NPI: 1316487119
Provider English Spoken: Y
Cultural Competency: N
AMANDA A BREEDLOVE
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BROWN, DARCIE

Provider Gender: Female
License Number: MFC119851
NPI: 1639796071
Provider English Spoken: Y
Cultural Competency: N
DARCIE D BROWN
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CALLAGHAN, KATHRYN

Provider Gender: Female
License Number: MFC106901
NPI: 1558768812
Provider English Spoken: Y
Cultural Competency: N
KATHRYN R CALLAGHAN
 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CEBALLOS, JACQUELINE CAMILLE

Provider Gender: Female
License Number: LCS110194
NPI: 1093350258

D6. 心理健康名錄

Provider English Spoken: Y

Cultural Competency: N

JACQUELINE CAMILLE

CEBALLOS

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-9676

Fax: (858) 633-4680

After Hours Phone: (858)
279-9676

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CEBALLOS, JACQUELINE CAMILLE

Provider Gender: Female

License Number: LCS110194

NPI: 1093350258

Provider English Spoken: Y

Cultural Competency: N

JACQUELINE CAMILLE

CEBALLOS

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628

NPI: 1285049932

Provider English Spoken: Y

Cultural Competency: N

COSMINA S CIOBANU

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

Fax: (858) 966-8164

After Hours Phone: (858)
576-1700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM



CIOBANU, COSMINA

Provider Gender: Female

D6. 心理健康名錄






License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA






Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU

 8001 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CLEMENT, LUIS



Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
LUIS F CLEMENT

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

CRISOL, CAROLINE

Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Spanish
Cultural Competency: N
CAROLINE M CRISOL LMFT
INC

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100

Fax: (619) 205-1952
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DEACON, CASSIE







Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

D6. 心理健康名錄




DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON




 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DEL AGUILA, FABIOLA

Provider Gender: Female
License Number: PSY24471
NPI: 1720283211
Provider English Spoken: Y
Spanish
Cultural Competency: N







FABIOLA DEL AGUILA
 1016 OUTER RD
SAN DIEGO, CA 92154
 Phone: (619) 429-3733
Fax: (619) 628-5550
 After Hours Phone: (619)

429-3733

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DIAZ, JAENAI


Provider Gender: Female
License Number: LCS80689
NPI: 1508241811
Provider English Spoken: Y
Spanish
Cultural Competency: N
JAENAI DIAZ

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER








DIOKNO, RHODA

Provider Gender: Female
License Number: PSY28073
NPI: 1629109483
Provider English Spoken: Y
Cultural Competency: N

ROHDA CARINO DIOKNO

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

DOLNAK, DOUGLAS

Provider Gender: Male
License Number: 20A6059
NPI: 1316147085
Provider English Spoken: Y
Cultural Competency: N
DOUGLAS R DOLNAK
 10737 CAMINO RUIZ
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (619) 474-4008
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM

D6. 心理健康名錄

DOSS, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N

KATIE L DOSS

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

DOSS, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N

KATIE L DOSS

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

DSOUZA, NICOLE

Provider Gender: Male
License Number: LCS101958
NPI: 1225462799
Provider English Spoken: Y
Cultural Competency: N

NICOLE A DSOUZA

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DUNN-PIRIO, ANASTASIE

Provider Gender: Female
License Number: A157861
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N

ANASTASIE M DUNN-PIRIO

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ESTAVILLO, SAUL


Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Spanish

SAUL J ESTAVILLO

286 EUCLID AVE STE 309
SAN DIEGO, CA 92114
Phone: (619) 527-7390
Fax: (619) 527-7394

After Hours Phone: (619) 527-7390
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER


D6. 心理健康名錄


 Hours: M-F
8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Spanish
Cultural Competency: N

SAUL J ESTAVILLO

 3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154


 Phone: (619) 662-4161

Fax: (619) 662-4109

 After Hours Phone: (619)
662-4161

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


FIRESTONE, MICHELLE

Provider Gender: Female
License Number: PSY33081
NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N

MICHELLE E FIRESTONE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FIRESTONE, MICHELLE


Provider Gender: Female
License Number: PSY33081
NPI: 1114687803

Provider English Spoken: Y

Cultural Competency: N


MICHELLE E FIRESTONE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FITZGERALD, MICHAEL

Provider Gender: Male
License Number: A73710
NPI: 1336393578

Provider English Spoken: Y


Cultural Competency: N

MICHAEL W FITZGERALD

 16918 DOVE CANYON RD

STE 100

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

FLANIGAN, MARILYN

Provider Gender: Female
License Number: MFC97326
NPI: 1588996912


Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D6. 心理健康名錄

8:00AM-6:00PM

FORZANI, CHRISTINA

Provider Gender: Female
License Number: PSY25710
NPI: 1902939630

Provider English Spoken: Y

Cultural Competency: N

CHRISTINA A FORZANI

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 961-1497

Fax: (858) 633-4682

After Hours Phone: (619)
961-1497

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FRANK, GUIDO

Provider Gender: Male

License Number: A86429

NPI: 1578608733

Provider English Spoken: Y

Cultural Competency: N

GUIDO K FRANK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8145

Fax: (858) 966-8154

After Hours Phone: (858)
966-8145

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

FRY, LIANE

Provider Gender: Female

License Number: MFC42570

NPI: 1003110917

Provider English Spoken: Y

Cultural Competency: N

LIANE M FRY

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

GARCIA, RICHARD

Provider Gender: Male

License Number: LCS28742

NPI: 1881198554

Provider English Spoken: Y

Cultural Competency: N

RICHARD R GARCIA

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0505

After Hours Phone: (619)
234-2158

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-4:30PM

GARCIA, JENNI

Provider Gender: Female

License Number: LPCC10346

NPI: 1437775863

Provider English Spoken: Y

Spanish

Cultural Competency: N

JENNI GARCIA

3025 BEYER BLVD
SAN DIEGO, CA 92154

Phone: (619) 662-4100

Fax: (619) 662-4119

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U


Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D6. 心理健康名錄


 Hours: M-F
8:00AM-5:00PM


GIAMONA, KRISTEN

Provider Gender: Female
License Number: PSY28419
NPI: 1376824383

Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


GIAMONA, KRISTEN

Provider Gender: Female
License Number: PSY28419
NPI: 1376824383

Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8787
Fax: (858) 987-5825

 After Hours Phone: (858)
810-8787

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

GOMEZ, JUANITA

Provider Gender: Female
License Number: PSY27439
NPI: 1790915759

Provider English Spoken: Y
Cultural Competency: N
JUANITA GOMEZ


 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


GULOTTA, SAMANTHA

Provider Gender: Female
License Number: MFC134199
NPI: 1790407732

Provider English Spoken: Y
Cultural Competency: N
SAMANTHA L GULOTTA

 9909 MIRA MESA BLVD
STE 200


SAN DIEGO, CA 92131

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


HERNANDEZ, SILVIA

Provider Gender: Female
License Number: MFC51787
NPI: 1982821179

Provider English Spoken: Y
Cultural Competency: N

SILVIA E HERNANDEZ


 3025 BEYER BLVD
SAN DIEGO, CA 92154

 Phone: (760) 520-8340
Fax: (619) 662-4119

 After Hours Phone: (760)
520-8340

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER





JOSHI, YASH

Provider Gender: Male
License Number: A147156
NPI: 1598151433


Provider English Spoken: Y
Cultural Competency: N

D6. 心理健康名錄

YASH B JOSHI


 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

KAYE, WALTER

Provider Gender: Male





License Number: A24819

NPI: 1922076223


Provider English Spoken: Y

Cultural Competency: N

WALTER H KAYE


 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
534-8019
 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male


License Number: A115892

NPI: 1780867119

Provider English Spoken: Y
Arabic

Cultural Competency: N


MOHAMAD H KHAFAJA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

KHAMISA, SORAIYA

Provider Gender: Female

License Number: LCS81951


NPI: 1811254386

Provider English Spoken: Y


Cultural Competency: N

SORAIYA N KHAMISA

 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

KLUEMPER, NICOLE

Provider Gender: Female

License Number: PSY27064


NPI: 1902125818

Provider English Spoken: Y

Cultural Competency: N

NICOLE S KLUEMPER


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

KLUEMPER, NICOLE

Provider Gender: Female

License Number: PSY27064


NPI: 1902125818

Provider English Spoken: Y

Cultural Competency: N




NICOLE S KLUEMPER

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 279-0377









 After Hours Phone: (858)

D6. 心理健康名錄

810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER







LABIB, MICHAEL

Provider Gender: Male
License Number: PSY34180
NPI: 1609055797
Provider English Spoken: Y
Arabic
Cultural Competency: N
MICHAEL LABIB

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM


LIDLAW, JOHN

Provider Gender: Male
License Number: MFC44560

NPI: 1689790073
Provider English Spoken: Y
Cultural Competency: N
JOHN K LAIDLAW
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER







LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female
License Number: PSY30776
NPI: 1134788730
Provider English Spoken: Y
Cultural Competency: N
FLORENCIA LEBENSOHN
CHIALVO
 7910 FROST ST STE 350
SAN DIEGO, CA 92123
 Phone: (858) 496-4800
 After Hours Phone: (858)
496-4800
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM

LEBENSOHN CHIALVO, FLORENCIA



Provider Gender: Female
License Number: PSY30776
NPI: 1134788730
Provider English Spoken: Y
Cultural Competency: N
FLORENCIA LEBENSOHN
CHIALVO

 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 After Hours Phone: (800)

D6. 心理健康名錄



926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Korean








Cultural Competency: N

DAVID J LEE

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM






LI, XIA



Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y

Mandarin
Cultural Competency: N
XIA LI
 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female
License Number: PSY27116
NPI: 1487026415
Provider English Spoken: Y
Cultural Competency: N
SARAH E LINKE








 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female
License Number: PSY27116
NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N
SARAH E LINKE

 4910 DIRECTORS PL STE
250
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM






LIU, TIMOTHY

Provider Gender: Male
License Number: A105535
NPI: 1720262801

Provider English Spoken: Y
Mandarin, Yue Chinese
Cultural Competency: N
TIMOTHY C LIU

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111





D6. 心理健康名錄

 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

LIU, TIMOTHY








Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Mandarin, Yue Chinese
Cultural Competency: N

TIMOTHY C LIU






 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 279-0377
 After Hours Phone: (858) 810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



LONGARDNER, KATHERINE

Provider Gender: Female
License Number: A137963

NPI: 1801215926
Provider English Spoken: Y
Cultural Competency: N
KATHERINE M LONGARDNER
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA


Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
CHESHER
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
Fax: (858) 534-6727
 After Hours Phone: (858) 534-8019
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681
 After Hours Phone: (619) 563-0250
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM








MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
 4290 POLK AVE
SAN DIEGO, CA 92105







D6. 心理健康名錄






 Phone: (619) 280-2058
Fax: (858) 633-4682
 After Hours Phone: (619) 280-2058
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM



MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM









MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

MCCULLUM, TIFFANY
Provider Gender: Female
License Number: PSY29329
NPI: 1528306206
Provider English Spoken: Y
Cultural Competency: N
TIFFANY MCCULLUM
 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 205-1949
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

MILLS, BRAD
Provider Gender: Male
License Number: LCS87409
NPI: 1598542813
Provider English Spoken: Y
Spanish
Cultural Competency: N
BRAD A MILLS

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y


D6. 心理健康名錄


Cultural Competency: N

JEAN-PHILIPPE MIRON

 16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

MONTOYA, JESSICA

Provider Gender: Female

License Number: PSY31647

NPI: 1003421256

Provider English Spoken: Y

Cultural Competency: N

JESSICA L MONTOYA

 4168 FRONT ST FL 3

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y


Cultural Competency: N


SHAVON C MOORE

 4510 EXECUTIVE DR

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y


Arabic

Cultural Competency: N

LAMA MUHAMMAD


 350 DICKINSON ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Arabic

Cultural Competency: N

LAMA MUHAMMAD

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

D6. 心理健康名錄

TIFFANY NAKAMURA

4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Vietnamese
Cultural Competency: N

HOANG A NGUYEN

410 DICKINSON ST STE 100
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F

8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NING, GRACE

Provider Gender: Female
License Number: PSY27293
NPI: 1598911315
Provider English Spoken: Y
Chinese, Mandarin
Cultural Competency: N

GRACE J NING

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

NING, GRACE

Provider Gender: Female
License Number: PSY27293
NPI: 1598911315
Provider English Spoken: Y
Chinese, Mandarin
Cultural Competency: N

GRACE J NING

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

NORMAN, MARC

Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN
200 W ARBOR DR

D6. 心理健康名錄

SAN DIEGO, CA 92103
☎ Phone: (619) 543-2827
📞 After Hours Phone: (619) 543-2827
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

NORMAN, MARC

Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN
📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

OJHA, PRITI

Provider Gender: Female
License Number: A139807
NPI: 1760897284
Provider English Spoken: Y
Cultural Competency: N
PRITI OJHA
📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

OJHA, PRITI

Provider Gender: Female
License Number: A139807
NPI: 1760897284
Provider English Spoken: Y
Cultural Competency: N
PRITI OJHA
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM






ORFF, HENRY

Provider Gender: Male
License Number: PSY27099
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
HENRY J ORFF
📍 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
☎ Phone: (844) 757-5337
📞 After Hours Phone: (844) 757-5337
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

ORTIZ, MARIA

Provider Gender: Female
License Number: PSY30953
NPI: 1497980775
Provider English Spoken: Y
Spanish
Cultural Competency: N
MARIA E ORTIZ
📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

D6. 心理健康名錄







 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PATTERSON-HYATT, KIMBERLY

Provider Gender: Female
License Number: PSY31903
NPI: 1780997742
Provider English Spoken: Y
Cultural Competency: N







KIMBERLY G

PATTERSON-HYATT




 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

PATTON, MICHAEL



Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619)
233-8500
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PRINCE, RENEE








Provider Gender: Female
License Number: PSY32206
NPI: 1467737908
Provider English Spoken: Y
Cultural Competency: N
RENEE K PRINCE
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (619) 474-4008
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM

QAYOUMI, WALI






Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
French
Cultural Competency: N
WALI Z QAYOUMI

 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 Phone: (619) 294-3746
Fax: (888) 539-8781
 After Hours Phone: (619)
294-3746
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM








RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111







D6. 心理健康名錄

 Phone: (858) 810-8700
Fax: (858) 279-0377
 After Hours Phone: (858) 810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






RIBEIRO CALDAS DOMINGUES, ISABEL

Provider Gender: Female
License Number: A132160
NPI: 1023367216
Provider English Spoken: Y
French, Portuguese, Spanish
Cultural Competency: N
ISABEL A RIBEIRO CALDAS DOMINGUES
 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



RICHARD, MARLA

Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM








SAWYER, CAROLYN

Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123








D6. 心理健康名錄

 Phone: (858) 966-4032
Fax: (858) 966-6227
 After Hours Phone: (858) 966-4032
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM






SAWYER, CAROLYN


Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
 7920 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 246-0794
Fax: (858) 496-9257
 After Hours Phone: (858) 246-0794
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN






Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
 3665 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
 Phone: (858) 966-5990
Fax: (858) 966-7508
 After Hours Phone: (858) 966-5990
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

SCHELLINGER, KRISTON


Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







SCHELLINGER, KRISTON

Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 Phone: (858) 246-1979
 After Hours Phone: (858) 246-1979
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







SCHELLINGER, KRISTON

Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
 330 LEWIS ST
SAN DIEGO, CA 92103

D6. 心理健康名錄

 Phone: (858) 246-1979
 After Hours Phone: (858) 246-1979
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

SCHLOSSER, TARA







Provider Gender: Female
License Number: MFC107868
NPI: 1407220437
Provider English Spoken: Y
Cultural Competency: N
TARA S SCHLOSSER
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


SERIO, TAYLOR

Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y








Cultural Competency: N
TAYLOR L SERIO
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

SERIO, TAYLOR




Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM




SHU, I WEI

Provider Gender: Male
License Number: A103813
NPI: 1992840144
Provider English Spoken: Y
Cultural Competency: N
I WEI SHU
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (858) 534-6200
Fax: (858) 534-6205
 After Hours Phone: (800) 926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

SILVEY, CHRISTOPHER

Provider Gender: Male
License Number: LCS85942
NPI: 1932793502
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER J SILVEY
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (858) 578-4220
Fax: (858) 578-4417
 After Hours Phone: (858) 578-4220







D6. 心理健康名錄

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

SOLORIO JR, ROBERTO


Provider Gender: Male
License Number: LCS102729
NPI: 1972088185
Provider English Spoken: Y
Cultural Competency: N

ROBERTO SOLORIO JR

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER









SUAREZ, ROBERTO

Provider Gender: Male
License Number: MFC25098
NPI: 1386785160
Provider English Spoken: Y
Cultural Competency: N
ROBERTO SUAREZ







 3025 BEYER BLVD
SAN DIEGO, CA 92154
 Phone: (619) 662-4100
Fax: (619) 662-4119
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SWEIGERT, JAMIE






Provider Gender: Female
License Number: LCS112304
NPI: 1396353595
Provider English Spoken: Y
Cultural Competency: N
JAMIE L SWEIGERT

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

TARLE, STEPHANIE


Provider Gender: Female
License Number: PSY32155
NPI: 1659920403
Provider English Spoken: Y
Cultural Competency: N
STEPHANIE J TARLE
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

THIESSEN, KAREN


Provider Gender: Female
License Number: MFC52523
NPI: 1184798241
Provider English Spoken: Y
Cultural Competency: N
KAREN A THIESSEN
 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U


D6. 心理健康名錄

Min/Max Age: 0\999

American Sign Language (ASL):  After Hours Phone: (619) 563-0250

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

TILTON, PETER

Provider Gender: Male

License Number: G27781


NPI: 1538258694

Provider English Spoken: Y

Cultural Competency: N

PETER A TILTON

 2630 1ST AVE
SAN DIEGO, CA 92103


 Phone: (619) 234-2158

Fax: (619) 234-0505


 After Hours Phone: (619)
234-2158


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204


NPI: 1255696183

Provider English Spoken: Y

Cultural Competency: N


TUAN TO

 4290 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681


 After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male

License Number: PSY30204


NPI: 1255696183

Provider English Spoken: Y


Cultural Competency: N

TUAN TO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

TO, TUAN

Provider Gender: Male


License Number: PSY30204

NPI: 1255696183

Provider English Spoken: Y

Cultural Competency: N
TUAN TO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437


Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105


 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

D6. 心理健康名錄

8:00AM-5:00PM
SA 8:00AM-2:00PM

TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

VANFOSSSEN, BRIAN

Provider Gender: Male
License Number: PSY23462
NPI: 1396072500
Provider English Spoken: Y
Cultural Competency: N
BRIAN VANFOSSSEN

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161
Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VIERLING, SABRINA

Provider Gender: Female
License Number: PSY26117
NPI: 1215288238
Provider English Spoken: Y
Cultural Competency: N
SABRINA C VIERLING

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

WEISSMAN, CORY

Provider Gender: Male
License Number: A174625
NPI: 1528720661

Provider English Spoken: Y
Cultural Competency: N

CORY R WEISSMAN

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127
Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

WU, MICHELLE

Provider Gender: Female
License Number: A125139
NPI: 1043650088
Provider English Spoken: Y
Cultural Competency: N
MICHELLE L WU

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8145
Fax: (858) 966-8164

After Hours Phone: (858)
966-8145

Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

D6. 心理健康名錄

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


YAGUDAYEVA, RAISA

Provider Gender: Female
License Number: 20A14848
NPI: 1942555990
Provider English Spoken: Y
Russian

Cultural Competency: N

RAISA YAGUDAYEVA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


YIDI, DIANA

Provider Gender: Female
License Number: LCS110300
NPI: 1194438663
Provider English Spoken: Y
Spanish

Cultural Competency: N

DIANA L YIDI

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM


ZAYAS, MARIO

Provider Gender: Male
License Number: MFC111273
NPI: 1275943557


Provider English Spoken: Y

Cultural Competency: N


MARIO E ZAYAS

 3025 BEYER BLVD STE
E-101

SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 428-5535

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

9:00AM-7:00PM

W-F 9:00AM-6:00PM

ZIMMERMAN, JENNIFER


Provider Gender: Female
License Number: LCS28729
NPI: 1811449077

Provider English Spoken: Y

Cultural Competency: N

JENNIFER A ZIMMERMAN

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

ZIMMERMAN, JENNIFER


Provider Gender: Female
License Number: LCS28729
NPI: 1811449077

Provider English Spoken: Y

Cultural Competency: N

JENNIFER A ZIMMERMAN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-9676

Fax: (858) 633-4680

 After Hours Phone: (858)
279-9676

 Website: N/A

D6. 心理健康名錄

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SAN MARCOS

ALTAMIRANO, LEON

Provider Gender: Male

License Number: PSY23734

NPI: 1619271517

Provider English Spoken: Y
Spanish

Cultural Competency: N

LEON ALTAMIRANO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ARIELLA, LYNDA

Provider Gender: Female

License Number: PSY19450

NPI: 1073518965

Provider English Spoken: Y

Cultural Competency: N

LYNDA R ARIELLA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\50

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CORTIZO, ROSA

Provider Gender: Female

License Number: PSY22278

NPI: 1952316648

Provider English Spoken: Y
Spanish

Cultural Competency: N

ROSA CORTIZO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FLYNN, DANIELLE

Provider Gender: Female

License Number: PSY26184

NPI: 1477785137

Provider English Spoken: Y
Cultural Competency: N

DANIELLE I FLYNN

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

GEORGIEV, MARY JO

Provider Gender: Female

License Number: PSY17954

NPI: 1518996875

Provider English Spoken: Y
Cultural Competency: N

MARY-JO GEORGIEV




150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 737-6767

Fax: (760) 736-8740









After Hours Phone: (760)

D6. 心理健康名錄

737-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

IMAM, SYED


Provider Gender: Male
License Number: PSY27695
NPI: 1447428271
Provider English Spoken: Y
Hindi
Cultural Competency: N
SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 15\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

REEG, JESSICA


Provider Gender: Female
License Number: MFC124306

NPI: 1144382987
Provider English Spoken: Y
Spanish
Cultural Competency: N
JESSICA REEG






 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

SIMPSON, ERIC




Provider Gender: Male
License Number: PSY28885
NPI: 1710110416
Provider English Spoken: Y
Cultural Competency: N
ERIC SIMPSON
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






SO LORIO JR, ROBERTO

Provider Gender: Male
License Number: LCS102729
NPI: 1972088185
Provider English Spoken: Y
Cultural Competency: N
ROBERTO SO LORIO JR
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

TONG, GARRICK


Provider Gender: Male
License Number: A102192
NPI: 1831361278
Provider English Spoken: Y
Cultural Competency: N
GARRICK G TONG
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 736-6767

D6. 心理健康名錄

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 4\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM








TORRES, HECTOR

Provider Gender: Male
License Number: PSY13309
NPI: 1720265614
Provider English Spoken: Y
Spanish
Cultural Competency: N
HECTOR M TORRES

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-8740
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



SAN YSIDRO

BALTRUS, JUSTINE

Provider Gender: Female
License Number: MFC132018
NPI: 1285040709
Provider English Spoken: Y
Cultural Competency: N
JUSTINE A BALTRUS
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM






CRAWFORD-DAY, ANN

Provider Gender: Female
License Number: A166646
NPI: 1386149706
Provider English Spoken: Y
Spanish
Cultural Competency: N
ANN E CRAWFORD-DAY
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

DEPAOLO, AMANDA

Provider Gender: Female
License Number: LCS99056
NPI: 1215420138
Provider English Spoken: Y
Cultural Competency: N
AMANDA L DEPAOLO
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

DIA, ALI

Provider Gender: Male
License Number: A47803
NPI: 1912031030

D6. 心理健康名錄

Provider English Spoken: Y
Arabic

Cultural Competency: N

ALI R DIA

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FONTANA, LOUIS

Provider Gender: Male

License Number: G49072

NPI: 1780734343

Provider English Spoken: Y

Cultural Competency: N

LOUIS A FONTANA

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

GONZALEZ-GARCIA, CAROLINA

Provider Gender: Female

License Number: MFC41111

NPI: 1215321955

Provider English Spoken: Y
Spanish

Cultural Competency: N

CAROLINA GONZALES GARCIA

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 565-2373

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

IBANEZ, BERENICE

Provider Gender: Female

License Number: PSY22080

NPI: 1740394386

Provider English Spoken: Y
Spanish

Cultural Competency: N

BERENICE B IBANEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100
Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

JENNINGS, AMY

Provider Gender: Female

License Number: LCS100075

NPI: 1609549161

Provider English Spoken: Y
Cultural Competency: N

AMY E JENNINGS

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

D6. 心理健康名錄

JIMENEZ, NANCY

Provider Gender: Female
License Number: MFC141209

NPI: 1568023596

Provider English Spoken: Y
Cultural Competency: N

NANCY JIMENEZ

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

JOHNSON, JENNIFER

Provider Gender: Female
License Number: PSY33295

NPI: 1023783248

Provider English Spoken: Y
Cultural Competency: N

JENNIFER JOHNSON

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\64

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LOPEZ, MARIBEL

Provider Gender: Female

License Number: LCS86171

NPI: 1669180600

Provider English Spoken: Y
Cultural Competency: N

MARIBEL, LOPEZ

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-8:00PM

SA 8:00AM-2:00PM

MONTES, DENISE

Provider Gender: Female

License Number: LCS115972

NPI: 1003694167

Provider English Spoken: Y

Cultural Competency: N

DENISE F MONTES

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SANTEE

MEAGHER, RAISHELLE

Provider Gender: Female

License Number: LCS109804

NPI: 1851821904

Provider English Spoken: Y

Cultural Competency: N

RAISHELLE L MEAGHER

120 TOWN CENTER PKWY
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


D6. 心理健康名錄

Min/Max Age: 0\999

American Sign Language (ASL): AZUCENA ACOSTA

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

VALLEY CENTER

PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536


NPI: 1952723736

Provider English Spoken: Y

Cultural Competency: N

CINDY PLASCENCIA

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082


 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): AZUCENA ACOSTA

N

 Accessibility: CONTACT PROVIDER

VISTA

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496


Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304


NPI: 1255937496

Provider English Spoken: Y
Spanish

Cultural Competency: N

AZUCENA ACOSTA

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-2:00PM
F 8:00AM-5:00PM
SA 9:00AM-6:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664


NPI: 1932359445

Provider English Spoken: Y
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

D6. 心理健康名錄

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892


After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

D6. 心理健康名錄

 *Site Languages(s) Spoken:* Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER


 *Hours:* M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA


Provider Gender: Female
License Number: LCS87166
NPI: 1285170662

Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ


 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone:* (760) 631-5000
Fax: (760) 414-3892

 *After Hours Phone:* (760) 631-5000


 *Website:* N/A


Accepting New Patients: Yes

 *Site English Spoken:* Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM


SA 9:00AM-4:00PM

CRUZ, VANESSA


Provider Gender: Female
License Number: LCS87166
NPI: 1285170662

Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ


 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone:* (760) 631-5000
Fax: (760) 414-3892

 *After Hours Phone:* (760) 631-5000

 *Website:* N/A


Accepting New Patients: Yes

 *Site English Spoken:* Y
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER


 *Hours:* M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY


 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone:* (760) 631-5000
Fax: (760) 414-3892

 *After Hours Phone:* (760) 631-5000


 *Website:* N/A

Accepting New Patients: Yes

 *Site English Spoken:* Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N


 *Accessibility:* CONTACT PROVIDER

DOUGHERTY, CHRISTINE


Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY

 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone:* (760) 631-5000
Fax: (760) 414-3891

 *After Hours Phone:* (760) 631-5000

 *Website:* N/A

Accepting New Patients: Yes

 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Telugu, Vietnamese, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility:* CONTACT PROVIDER

 *Hours:* M-TH
9:00AM-8:00PM








F 9:00AM-5:00PM
SA 9:00AM-4:00PM

D6. 心理健康名錄

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Spanish
Cultural Competency: N

ADRIANA J MENDEZ

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Spanish
Cultural Competency: N







ADRIANA J MENDEZ

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
Provider English Spoken: Y
Cultural Competency: N
GRETA R MEYERHOF

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA



Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
Provider English Spoken: Y
Cultural Competency: N
GRETA R MEYERHOF

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000

Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

D6. 心理健康名錄

NEVILLE, MARGARET

Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE

📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
📠 Fax: (760) 414-3892
📞 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
🗨 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
📠 Fax: (760) 414-3892
📞 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
🗨 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
📠 Fax: (760) 414-3892
📞 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
🗨 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y

Spanish

Cultural Competency: N
ADRIANA SANCHEZ
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
📠 Fax: (760) 414-3892
📞 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
🗨 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA SANCHEZ
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
📠 Fax: (760) 414-3892
📞 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
🗨 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

D6. 心理健康名錄


SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Spanish

Cultural Competency: N

SONYA L SMITH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON


 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM


WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081

Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON


 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D7. 視力提供者目錄 - 眼科和視力服務

ALPINE

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687


Accepting New Patients: Yes

Site English Spoken: Y


D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL): License Number: A34834

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943


NPI: 1700556438

Provider English Spoken: Y
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male


NPI: 1760473797

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137


NPI: 1275263584

Provider English Spoken: Y
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MARR, RYAN, OD


Provider Gender: Male


License Number: 35302

NPI: 1235857525

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

 Phone: (619) 445-2687

Fax: (619) 445-0801

 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687



Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

D7. 視力提供者目錄 - 眼科和視力服務

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM*

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE


 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 *Phone: (619) 445-2687*
Fax: (619) 445-0801
 *After Hours Phone: (619) 445-2687*

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM*


VIVIRITO, MARY, OD


Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y

Spanish

Cultural Competency: Y
WEST COAST EYE CARE

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

 *Phone: (619) 445-2687*
Fax: (619) 445-0801


 *After Hours Phone: (619) 445-2687*

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM*

BONITA


CHA, DANIEL, OD


Provider Gender: Male
License Number: 14779
NPI: 1386078020

Provider English Spoken: Y
Spanish

Cultural Competency: Y

EYECARE OF BONITA

 4502 BONITA RD
BONITA, CA 91902

 *Phone: (619) 479-7334*
Fax: (619) 475-3456


 *After Hours Phone: (619) 479-7334*

Accepting New Patients: Yes


Site English Spoken: Y
 Site Languages(s) Spoken:

Spanish

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M 8:00AM-6:30PM
W 8:00AM-6:00PM
TH 12:30AM-6:00PM
F 8:00AM-6:00PM
SA 9:00AM-2:00PM*

CARLSBAD

HO, TRAM, OD

Provider Gender: Female
License Number: 13485
NPI: 1245464460



Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

EYE STYLE OPTOMETRY

 5814 VAN ALLEN WAY STE 146


CARLSBAD, CA 92008

 *Phone: (760) 606-2020*
 *After Hours Phone: (760) 606-2020*


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 8:00AM-4:00PM*

D7. 視力提供者目錄 - 眼科和視力服務

SA 9:00AM-3:00PM

CHULA VISTA

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

French, Portuguese, Spanish,
Tagalog

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CASTILLEJOS, MARIA, MD

Provider Gender: Female

License Number: A37652

NPI: 1043395098

Provider English Spoken: Y
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

VILLA OPTOMETRY INC

531 TELEGRAPH CANYON
RD

CHULA VISTA, CA 91910

Phone: (619) 482-2020

Fax: (619) 482-2671

After Hours Phone: (619)
482-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-6:00PM

CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190

Provider English Spoken: Y
Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522

Provider English Spoken: Y
Spanish

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y
PETER D HUANG OD INC

557 H ST
CHULA VISTA, CA 91910

Phone: (619) 422-0139

Fax: (619) 422-0066

After Hours Phone: (619)
422-0139

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-4:00PM
SA 9:00AM-2:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y
Hindi

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y
Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male

License Number: 10906

NPI: 1457507279

Provider English Spoken: Y

Cultural Competency: Y

EASTLAKE VISION CENTER DR
MASCARENO

2260 OTAY LAKES RD STE
111

D7. 視力提供者目錄 - 眼科和視力服務

CHULA VISTA, CA 91915

☎ Phone: (619) 421-5550

Fax: (619) 421-6022

📞 After Hours Phone: (619) 421-5550

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-3:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male

License Number: 10906

NPI: 1457507279

Provider English Spoken: Y

Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO

📍 440 4TH AVE

CHULA VISTA, CA 91910

☎ Phone: (619) 427-2020

Fax: (866) 254-5707

📞 After Hours Phone: (619) 427-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-TH
9:00AM-6:00PM
F 9:00AM-5:00PM

NGUYEN, TRACY, OD

Provider Gender: Female

License Number: 10859

NPI: 1265596621

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE

OPTOMETRY

📍 345 F ST STE 240

CHULA VISTA, CA 91910

☎ Phone: (858) 467-0655

Fax: (619) 425-9797

📞 After Hours Phone: (858) 467-0655

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH
10:00AM-3:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y
Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

📞 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Arabic, Hindi, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

PLUCINIK, STANLEY, OD

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE

MED GROUP

📍 342 F ST

CHULA VISTA, CA 91910

☎ Phone: (619) 422-1471

Fax: (619) 271-7044

📞 After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: French, Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT


D7. 視力提供者目錄 - 眼科和視力服務

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female
License Number: 33711
NPI: 1184146094
Provider English Spoken: Y
Spanish
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910
📞 Phone: (619) 422-1471
Fax: (619) 271-7044
🕒 After Hours Phone: (619)
422-1471


Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY
📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
📞 Phone: (619) 421-6600
Fax: (619) 421-6006

🕒 After Hours Phone: (619)
421-6600
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Arabic
Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY
📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
📞 Phone: (619) 421-6600
Fax: (619) 421-6006
🕒 After Hours Phone: (619)
421-6600


Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:

Arabic, Hindi, Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

VILLA, ANGELICA, OD

Provider Gender: Female
License Number: 10561
NPI: 1962544965
Provider English Spoken: Y
Spanish
Cultural Competency: Y

VILLA OPTOMETRY INC
📍 531 TELEGRAPH CANYON
RD
CHULA VISTA, CA 91910
📞 Phone: (619) 482-2020
Fax: (619) 482-2671
🕒 After Hours Phone: (619)
482-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
9:00AM-6:00PM

CORONADO

KATZMAN, LEE, MD

D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619)
437-4406

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619)
437-4406

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619)
437-4406

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Russian

Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619)
437-4406

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM



EL CAJON

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N

D7. 視力提供者目錄 - 眼科和視力服務

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM


ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540

Provider English Spoken: Y
Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020



 *Phone: (619) 440-5400*
Fax: (619) 440-0239

 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:30AM-6:00PM



BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146

Provider English Spoken: Y
Cultural Competency: Y


RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200

EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:30AM-6:00PM


BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200
EL CAJON, CA 92020


 *Phone: (619) 440-5400*
Fax: (619) 440-0239

 *After Hours Phone: (619) 440-5400*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:30AM-6:00PM


BUTLER, KIM, OD

Provider Gender: Male
License Number: 6405
NPI: 1467444844

Provider English Spoken: Y
Cultural Competency: Y

KIM J BUTLER OD

 1273 BROADWAY
EL CAJON, CA 92021

 *Phone: (619) 579-2345*
Fax: (619) 579-0876


 *After Hours Phone: (619) 579-2345*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
9:00AM-5:00PM
SA 9:00AM-12:00AM


CHAN, KWOK FUNG, OD

Provider Gender: Male
License Number: 35087
NPI: 1407508385

Provider English Spoken: Y
Cultural Competency: Y

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

 *Phone: (619) 670-6296*
Fax: (619) 670-8852































 *After Hours Phone: (619) 670-6296*

Accepting New Patients: Yes



 *Site English Spoken: Y*
 *Site Languages(s) Spoken:*
Italian, Spanish






American Sign Language (ASL):

D7. 視力提供者目錄 - 眼科和視力服務

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM*
- DEAN, MOENA, OD**
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:30AM-6:00PM*
- DYER, SHARON, OD**
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:30AM-6:00PM*
- HAMOUIE, JUDY, OD**
Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 8:30AM-6:00PM
HAN, SULKI, OD
Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Korean
Cultural Competency: Y
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619) 440-5400*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:30AM-6:00PM*
- HSU, CHRISTOPHER, MD**
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
- RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 *Phone: (619) 440-5400*
Fax: (619) 440-0239
 *After Hours Phone: (619)*




D7. 視力提供者目錄 - 眼科和視力服務



440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-6:00PM






KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Spanish
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-6:00PM


KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137

NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-6:00PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-6:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-6:00PM

MCMURREN, BRITTANY, OD
Provider Gender: Female
License Number: 14824
NPI: 1104243815
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

D7. 視力提供者目錄 - 眼科和視力服務

☎ Phone: (619) 670-6296
Fax: (619) 670-8852

📞 After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

Hindi

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

📞 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

📞 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

📞 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400
Fax: (619) 440-0239

📞 After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

WERNER, REX, OD

Provider Gender: Male

License Number: 9378

NPI: 1891760716

Provider English Spoken: Y

Italian, Spanish

Cultural Competency: Y

WERNER OPTOMETRY

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

Phone: (619) 670-6296

Fax: (619) 670-8852

After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

WERNER, R AARON, OD

Provider Gender: Male

License Number: 13478

NPI: 1821259458

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WERNER OPTOMETRY

2650 JAMACHA RD STE 155
EL CAJON, CA 92019

Phone: (619) 670-6296
Fax: (619) 670-8852

After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

D7. 視力提供者目錄 - 眼科和視力服務

🕒 *Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM*

ZHAO, TAILUN, MD

*Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y*
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ *Phone: (619) 440-5400
Fax: (619) 440-0239*

🕒 *After Hours Phone: (619)
440-5400*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M-F
8:30AM-6:00PM*

ZVANUT, DONALD, OD

*Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y*
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ *Phone: (619) 440-5400
Fax: (619) 440-0239*

🕒 *After Hours Phone: (619)
440-5400*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M-F
8:30AM-6:00PM*

ENCINITAS

ADAMS, MONA, OD

*Provider Gender: Female
License Number: 14457
NPI: 1942564521*

*Provider English Spoken: Y
Cultural Competency: Y*

RADY CHILDRENS HOSPITAL
ENCINITAS

📍 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

☎ *Phone: (858) 309-7702
Fax: (858) 966-7403*

🕒 *After Hours Phone: (858)
309-7702*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M-F
8:00AM-5:00PM*

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

*Provider English Spoken: Y
Spanish, Vietnamese*

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ *Phone: (760) 943-7141
Fax: (760) 943-0371*

🕒 *After Hours Phone: (760)
943-7141*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
Site Languages(s) Spoken:
Spanish*

*American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M-F
8:00AM-5:00PM*

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

*Provider English Spoken: Y
Spanish*

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

📍 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

☎ *Phone: (858) 309-7702
Fax: (858) 966-7403*

🕒 *After Hours Phone: (858)
309-7702*

D7. 視力提供者目錄 - 眼科和視力服務

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License Number: A154902

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL

ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

D7. 視力提供者目錄 - 眼科和視力服務

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y
Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

D7. 視力提供者目錄 - 眼科和視力服務

🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
German, Spanish
Cultural Competency: Y

RADY CHILDRENS HOSPITAL ENCINITAS

📍 477 N EL CAMINO REAL

STE D302
ENCINITAS, CA 92024
☎ Phone: (858) 309-7702
Fax: (858) 966-7403

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371

After Hours Phone: (760) 943-7141
Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141
Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ESCONDIDO

ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM


ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP


D7. 視力提供者目錄 - 眼科和視力服務

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872


Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y
Spanish


Cultural Competency: Y

RADY CHILDRENS


SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699


 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

BERGMARK, JAMIE, OD

Provider Gender: Female

License Number: 33657

NPI: 1669920757

Provider English Spoken: Y

Cultural Competency: Y


RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY

STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License Number: A154902


NPI: 1104237353

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

D7. 視力提供者目錄 - 眼科和視力服務

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

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Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

GOLDSTONE, ADAM, OD

Provider Gender: Male

License Number: 11051

NPI: 1316972995

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

D7. 視力提供者目錄 - 眼科和視力服務


Spanish

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 *Phone: (760) 743-5872*

Fax: (760) 743-5879

 *After Hours Phone: (760)
743-5872*

Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 *Phone: (760) 743-5872*

Fax: (760) 743-5879

 *After Hours Phone: (760)
743-5872*

Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438


Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 *Phone: (760) 743-5872*

Fax: (760) 743-5879

 *After Hours Phone: (760)
743-5872*

Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

KARAPETIAN, ELENA, OD

Provider Gender: Female

License Number: 34514

NPI: 1184250417


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 *Phone: (760) 743-5872*

Fax: (760) 743-5879

 *After Hours Phone: (760)
743-5872*

Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
8:00AM-5:00PM*

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

D7. 視力提供者目錄 - 眼科和視力服務

ACUITY EYE GROUP

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STE 200
ESCONDIDO, CA 92026
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Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): IT

Hours: M-F
8:00AM-5:00PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
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After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

Hours: M-F
8:00AM-5:00PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): IT

Hours: M-F
8:30AM-4:30PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

TAM T LE OD INC

1711 E VALLEY PKWY STE
109

ESCONDIDO, CA 92027

Phone: (760) 737-6064

Fax: (760) 737-6064

After Hours Phone: (760)
737-6064

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1T

🕒 Hours: M-TH
9:00AM-5:30PM
F 9:00AM-1:00PM

LEE, JASON, OD

Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Spanish
Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

📞 Phone: (760) 755-7600
Fax: (760) 755-7699

🕒 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License Number: A155228
NPI: 1588624852

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

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Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female
License Number: A105472
NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

📞 Phone: (760) 755-7600
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🕒 After Hours Phone: (760)
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Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782

Provider English Spoken: Y
Indonesian, Spanish


Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

D7. 視力提供者目錄 - 眼科和視力服務

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Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): Cultural Competency: Y

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male

License Number: A100897

NPI: 1497792220

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

German, Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

PANSARA, MEGHA, MD

Provider Gender: Female

License Number: A143429

NPI: 1184983728

Provider English Spoken: Y

Gujarati


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:30AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434


Provider English Spoken: Y

Cultural Competency: Y


ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

PATEL, SARJAN, MD

D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site): 1T*

Hours: M-F

8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site): 1T*

Hours: M-F

8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site): 1T*

Hours: M-F

8:00AM-5:00PM

THACH, TERILYN, OD

Provider Gender: Female

License Number: 11456

NPI: 1710030861

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY
ESCONDIDO, CA 92027

Phone: (760) 738-9931

Fax: (760) 738-9933

After Hours Phone: (760)
738-9931

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

*Public transportation (within
1/2 mile from Site): 1T*

Hours: M-TU

9:30AM-5:00PM

TH 10:00AM-5:30PM

F 9:30AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

D7. 視力提供者目錄 - 眼科和視力服務

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-4:30PM

VERRET, ERIC, OD

Provider Gender: Male
License Number: 11401
NPI: 1194891853

Provider English Spoken: Y
French, Spanish

Cultural Competency: Y
ESCONDIDO EYECARE

613 E GRAND AVE ESCONDIDO, CA 92025

Phone: (760) 747-7979
Fax: (760) 747-7799

After Hours Phone: (760) 747-7979

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, French, Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9:00AM-6:00PM
W-TH 9:00AM-8:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026
 Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

FALLBROOK

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female

License Number: 13551

NPI: 1700040748

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CONNOR, JEFFREY, OD

Provider Gender: Male

License Number: 33683

NPI: 1063968980

Provider English Spoken: Y

Spanish

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

☎ Phone: (760) 728-5728

Fax: (760) 728-5934

📞 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

☎ Phone: (760) 728-5728

Fax: (760) 728-5934

📞 After Hours Phone: (760)

728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

☎ Phone: (760) 723-8417

Fax: (760) 758-2063

📞 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU 9:00AM-6:00PM
W-TH 9:00AM-5:00PM
F 9:00AM-1:00PM

SA 9:00AM-1:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

☎ Phone: (760) 723-8417

Fax: (760) 758-2063

📞 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU 9:00AM-6:00PM

W-TH 9:00AM-5:00PM

F 9:00AM-1:00PM

SA 9:00AM-1:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

☎ Phone: (760) 728-5728

D7. 視力提供者目錄 - 眼科和視力服務

Fax: (760) 728-5934

☎ After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

TEW, JOHN, MD

Provider Gender: Male

License Number: A83206

NPI: 1174593354

Provider English Spoken: Y
Portuguese

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

☎ Phone: (760) 728-5728

Fax: (760) 728-5934

☎ After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y
Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

📍 894 PALM AVE STE B
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 424-9333

Fax: (619) 424-3356

☎ After Hours Phone: (619)
424-9333

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM

HANONO, ABRAHAM, OD

Provider Gender: Male

License Number: 14900

NPI: 1356754741

Provider English Spoken: Y
Hebrew, Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

📍 894 PALM AVE STE B

IMPERIAL BEACH, CA 91932

☎ Phone: (619) 424-9333

Fax: (619) 424-3356

☎ After Hours Phone: (619)
424-9333

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM

LA JOLLA

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

CODEN, DANIEL, MD

Provider Gender: Male

License Number: G57587

NPI: 1942317508

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

📞 Phone: (858) 534-6290

Fax: (858) 732-0921

D7. 視力提供者目錄 - 眼科和視力服務

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y
Spanish

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

Spanish

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:00AM-4:30PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

PERLMAN

D7. 視力提供者目錄 - 眼科和視力服務

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-4:30PM

SA 8:00AM-2:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

D7. 視力提供者目錄 - 眼科和視力服務

8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

D7. 視力提供者目錄 - 眼科和視力服務

8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

LUSBY, FRANKLIN, MD

Provider Gender: Male
License Number: G41830
NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE

9850 GENESEE AVE STE
220
LA JOLLA, CA 92037
Phone: (858) 459-6200
Fax: (858) 459-2025
After Hours Phone: (858)

459-6200

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001

NPI: 1962817981

Provider English Spoken: Y
Spanish

Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921


After Hours Phone: (858)
534-6290

Accepting New Patients: Yes


Site English Spoken: Y
American Sign Language (ASL):

D7. 視力提供者目錄 - 眼科和視力服務

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104


NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (858) 534-6290
Fax: (858) 732-0921

 After Hours Phone: (858)
534-6290


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y


Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

 Phone: (858) 534-6290
Fax: (858) 732-0921

 After Hours Phone: (858)
534-6290


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-4:30PM

MOOR, TRACY, OD

Provider Gender: Female


License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y
UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290
Fax: (858) 732-0921

 After Hours Phone: (858)
534-6290


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782


Provider English Spoken: Y
Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037


 Phone: (858) 457-3010
Fax: (858) 457-0028

 After Hours Phone: (858)
457-3010


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

D7. 視力提供者目錄 - 眼科和視力服務

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F

8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

📞 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

D7. 視力提供者目錄 - 眼科和視力服務

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y
Spanish, Chinese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y
Spanish, Chinese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

D7. 視力提供者目錄 - 眼科和視力服務

Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:30PM

ZHAO, TAILUN, MD

Provider Gender: Male
 License Number: C186414
 NPI: 1952659203
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

ZVANUT, DONALD, OD

Provider Gender: Male
 License Number: 8642
 NPI: 1336211804
 Provider English Spoken: Y

Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

LA MESA

ABOUL-HOSN, RYAN, OD

Provider Gender: Male
 License Number: 13688
 NPI: 1467651919
 Provider English Spoken: Y
 Arabic
 Cultural Competency: Y
 DAVID M NEWMAN OD
 5642 LAKE MURRAY BLVD
 LA MESA, CA 91942
 Phone: (619) 589-6263
 Fax: (619) 589-6264
 After Hours Phone: (619) 589-6263

Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 10:00AM-4:00PM
 W 10:00AM-4:00PM
 F 10:00AM-4:00PM

AOTO, KIM, OD


























Provider Gender: Female
 License Number: 14524
 NPI: 1780935650
 Provider English Spoken: Y
 Spanish, Vietnamese
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM


ASIS, STEPHANIE, OD

Provider Gender: Female
 License Number: 34013
 NPI: 1902383540
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP

D7. 視力提供者目錄 - 眼科和視力服務

-  7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- AVALLONE, THOMAS, MD**
 Provider Gender: Male
 License Number: A147199
 NPI: 1679865950
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
-  7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM
- BAGHOUMIAN, MARINEH, OD**
 Provider Gender: Female
 License Number: 14842
 NPI: 1972929438
 Provider English Spoken: Y
 Armenian
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- BAUMANN, DANIELA, OD**
 Provider Gender: Female
 License Number: 34530
 NPI: 1982232146
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
-  Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM
- BAUMANN, DANIELA, OD**
 Provider Gender: Female
 License Number: 34530
 NPI: 1982232146
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U


D7. 視力提供者目錄 - 眼科和視力服務

 Hours: M-F
8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942


 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM


CAUCHI, CAROLINE

GUERRERO, OD

Provider Gender: Female
License Number: 6882
NPI: 1831268903
Provider English Spoken: Y
Spanish
Cultural Competency: Y
VISION SOLUTIONS

OPTOMETRY

 8235 UNIVERSITY AVE
LA MESA, CA 91942

 Phone: (619) 461-4913
Fax: (888) 509-6483

 After Hours Phone: (619)
461-4913

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020
Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U


 Hours: M-F
8:00AM-5:00PM

CHEW, WESLEY, OD

Provider Gender: Male
License Number: 14901
NPI: 1952714446

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T


 Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Spanish

Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

D7. 視力提供者目錄 - 眼科和視力服務

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189


 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

CONRAD, RANDALL, OD

Provider Gender: Male

License Number: 6423


NPI: 1962617464

Provider English Spoken: Y
Spanish


Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

 7877 PARKWAY DR STE 100
LA MESA, CA 91942

 Phone: (619) 460-3711


Fax: (619) 460-2184

 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U

 Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955


NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female


License Number: 33955


NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450


NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

D7. 視力提供者目錄 - 眼科和視力服務

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

GILES, GREGORY, OD

Provider Gender: Male

License Number: 11362

NPI: 1114931250

Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CARE

8007 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 466-5665

Fax: (619) 466-5688

After Hours Phone: (619)
466-5665

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HAIGHT, BRUCE, MD

Provider Gender: Male

License Number: G41117

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

D7. 視力提供者目錄 - 眼科和視力服務

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

HAN, SULKI, OD

Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Korean
Cultural Competency: Y
ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 Phone: (619) 722-8460
Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:00AM-5:00PM

HIXSON, THOMAS, OD

Provider Gender: Male
License Number: 7490
NPI: 1528072683
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CARE
 8007 LA MESA BLVD LA MESA, CA 91942
 Phone: (619) 466-5665
Fax: (619) 466-5688
 After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

HUNG, JANICE, OD

Provider Gender: Female

License Number: 34296

NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
1/2 mile from Site): 1T

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

🕒 *Hours: M-F*
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ *Phone: (619) 465-2020*
Fax: (619) 698-1189

🕒 *After Hours Phone: (619)*
465-2020

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*

🗒 *Site Languages(s) Spoken:*
Spanish

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: M-F*
8:00AM-5:00PM

KATZMAN, LEE, MD

Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 7877 PARKWAY DR STE 100

LA MESA, CA 91942

☎ *Phone: (619) 460-3711*
Fax: (619) 460-2184

🕒 *After Hours Phone: (619)*
460-3711

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: M-F*
8:30AM-4:30PM

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ *Phone: (619) 722-8460*
Fax: (619) 722-8465

🕒 *After Hours Phone: (619)*
722-8460

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*

🗒 *Site Languages(s) Spoken:*
Spanish

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M-F*
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ *Phone: (619) 722-8460*
Fax: (619) 722-8465

🕒 *After Hours Phone: (619)*
722-8460

Accepting New Patients: Yes

🗒 *Site English Spoken: Y*

🗒 *Site Languages(s) Spoken:*
Spanish

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M-F*
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ *Phone: (619) 465-2020*

D7. 視力提供者目錄 - 眼科和視力服務

Fax: (619) 698-1189

☎ After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

THE OASIS

📍 5500 GROSSMONT
CENTER DR # 269
LA MESA, CA 91942

☎ Phone: (619) 583-4295

Fax: (619) 313-1133

☎ After Hours Phone: (619)
583-4295

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: TU-W

9:00AM-5:00PM

LEE, JENNIFER, OD

Provider Gender: Female

License Number: 33443

NPI: 1891147351

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

LEVY, PHILLIP, OD

Provider Gender: Male

License Number: 4884

NPI: 1528189115

Provider English Spoken: Y

Cultural Competency: Y

PHILLIP A LEVY OD

📍 5020 BALTIMORE DR STE B
LA MESA, CA 91942

☎ Phone: (619) 464-8303

Fax: (619) 464-4971

☎ After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 10:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

MERALI, MURTAZA, OD

Provider Gender: Female

License Number: 14558

NPI: 1972944189

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT

D7. 視力提供者目錄 - 眼科和視力服務

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

NEWMAN, DAVID, OD

Provider Gender: Male
License Number: 7296
NPI: 1508856378
Provider English Spoken: Y

Cultural Competency: Y
DAVID M NEWMAN OD
📍 5642 LAKE MURRAY BLVD
LA MESA, CA 91942
📞 Phone: (619) 589-6263
Fax: (619) 589-6264
🕒 After Hours Phone: (619)
589-6263
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M 10:00AM-4:00PM
W 10:00AM-4:00PM
F 10:00AM-4:00PM

NGUYEN, THY, OD

Provider Gender: Female
License Number: 12746
NPI: 1750490413
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
📞 Phone: (619) 722-8460
Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942
📞 Phone: (619) 460-3711
Fax: (619) 460-2184
🕒 After Hours Phone: (619)
460-3711
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Hindi
Cultural Competency: Y
ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
📞 Phone: (619) 722-8460

D7. 視力提供者目錄 - 眼科和視力服務

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

PETERS, JAMIE, OD

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

📍 8235 UNIVERSITY AVE
LA MESA, CA 91942

☎ Phone: (619) 461-4913

Fax: (888) 509-6483

☎ After Hours Phone: (619)

461-4913

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

QUACH, PHUC, OD

Provider Gender: Male
License Number: 12891
NPI: 1770617805
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020
Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male
License Number: 34978
NPI: 1568813434

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female
License Number: 9726
NPI: 1174730824

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460
Fax: (619) 722-8465

📞 After Hours Phone: (619)

D7. 視力提供者目錄 - 眼科和視力服務

722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
 License Number: 34990
 NPI: 1245733476
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990
 NPI: 1245733476
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619)
 465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

TONNU, ANH, OD

Provider Gender: Female
 License Number: 11318
 NPI: 1679521280
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y

Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

TRAN, HENRY, OD

Provider Gender: Male
 License Number: 15159
 NPI: 1467846709
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM


TSUI, NANCY, OD


Provider Gender: Female
 License Number: 33944
 NPI: 1841785037
 Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465


 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

TU, BEVERLY, OD

Provider Gender: Female


License Number: 34108


NPI: 1053892794

Provider English Spoken: Y
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667

Provider English Spoken: Y
Spanish


Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

D7. 視力提供者目錄 - 眼科和視力服務

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

WONG, SHARON, OD

Provider Gender: Female
License Number: 15137
NPI: 1497159552
Provider English Spoken: Y
Spanish
Cultural Competency: Y


ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465


 *After Hours Phone: (619) 722-8460*

Accepting New Patients: Yes


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T


 *Hours: M-F*
8:00AM-5:00PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Russian
Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

 7877 PARKWAY DR STE 100
LA MESA, CA 91942

 *Phone: (619) 460-3711*

Fax: (619) 460-2184


 *After Hours Phone: (619) 460-3711*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
8:30AM-4:30PM

ZVANUT, DONALD, OD

Provider Gender: Male


License Number: 8642


NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942


 *Phone: (619) 465-2020*

Fax: (619) 698-1189

 *After Hours Phone: (619) 465-2020*

Accepting New Patients: Yes


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642


NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942


 *Phone: (619) 722-8460*

Fax: (619) 722-8465

 *After Hours Phone: (619) 722-8460*

Accepting New Patients: Yes


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F*
8:00AM-5:00PM

LAKESIDE

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9710 WINTER GARDENS
BLVD STE A

D7. 視力提供者目錄 - 眼科和視力服務

LAKESIDE, CA 92040
☎ Phone: (619) 443-1075
Fax: (619) 443-9382
🕒 After Hours Phone: (619) 443-1075
Accepting New Patients: Yes
🗲 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male
License Number: 35207
NPI: 1740868603
Provider English Spoken: Y
Cultural Competency: Y
JOHN C FLEMING OD

📍 9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040

☎ Phone: (619) 443-1075
Fax: (619) 443-9382

🕒 After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

🗲 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male
License Number: 15100
NPI: 1568861425
Provider English Spoken: Y
Cultural Competency: Y
JOHN C FLEMING OD

📍 9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040

☎ Phone: (619) 443-1075
Fax: (619) 443-9382

🕒 After Hours Phone: (619) 443-1075

Accepting New Patients: Yes

🗲 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619)

470-2700

Accepting New Patients: Yes

🗲 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

🗲 Site English Spoken: Y
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

🕒 Hours: M-F
8:00AM-4:30PM

🕒 Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

🕒 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD

D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

HAIGHT, BRUCE, MD

Provider Gender: Male

License Number: G41117

NPI: 1427029628

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM

TH 8:00AM-6:00PM

F 8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

HUNG, JANICE, OD

Provider Gender: Female

License Number: 34296

NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

D7. 視力提供者目錄 - 眼科和視力服務

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM

F 8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y
Hindi

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2159

Fax: (619) 477-2128

☎ After Hours Phone: (619)

477-2159

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

D7. 視力提供者目錄 - 眼科和視力服務

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159























Accepting New Patients: Yes

Site English Spoken: Y






Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

D7. 視力提供者目錄 - 眼科和視力服務






- N**
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: SU 10:00AM-4:00PM**
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM
- LEE, AUSTIN, OD**
Provider Gender: Male
License Number: 14519
NPI: 1922356914
Provider English Spoken: Y
Cultural Competency: Y
VIVE OPTOMETRY
 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 477-2771
Fax: (619) 477-1680
 After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: TU 10:00AM-5:00PM**
W-F 9:30AM-5:00PM
- LEE, SALLY, DO**
Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Spanish, Chinese
Cultural Competency: Y
- SAN DIEGO EYE PROFESSIONALS**
 2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950
 Phone: (619) 583-4295
Fax: (619) 825-7300
 After Hours Phone: (619) 583-4295
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-F 10:00AM-6:00PM**
- MARLAY, GREG, OD**
Provider Gender: Male
License Number: 6998
NPI: 1306903083
Provider English Spoken: Y
Cultural Competency: Y
MARLAY ENTERPRISES
 1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA 91950
 Phone: (619) 477-4166
 After Hours Phone: (619) 477-4166
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M 10:00AM-6:00PM**
W 10:00AM-6:00PM
F 10:00AM-6:00PM
SA 10:00AM-2:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1T
 **Hours: M-TU 8:00AM-6:00PM**
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

D7. 視力提供者目錄 - 眼科和視力服務

 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone: (619)
 470-2700
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM




MCGRAW, JOSEPH, MD



Provider Gender: Male
 License Number: A155228
 NPI: 1588624852
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
 Fax: (619) 267-8221
 After Hours Phone: (619)
 470-2700
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

MCGRAW, JOSEPH, MD




Provider Gender: Male
 License Number: A155228
 NPI: 1588624852
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP



 655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
 Fax: (619) 479-5233
 After Hours Phone: (619)
 472-1010
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

MENDOZA, RAYMUNDO, OD






Provider Gender: Male
 License Number: 8150
 NPI: 1306837760
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 NATIONAL CITY EYECARE

 2403 E PLAZA BLVD
 NATIONAL CITY, CA 91950
 Phone: (619) 475-2184
 Fax: (619) 475-3917
 After Hours Phone: (619)
 475-2184




























Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Tagalog
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-TU
 10:00AM-5:00PM
 TH-F 10:00AM-5:00PM

MORRISON REYES, JOSHUA, MD



Provider Gender: Male
 License Number: A125435
 NPI: 1235366782
 Provider English Spoken: Y
 Indonesian, Spanish
 Cultural Competency: Y
 ACUITY EYE GROUP

 655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
 Fax: (619) 479-5233
 After Hours Phone: (619)
 472-1010
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM

D7. 視力提供者目錄 - 眼科和視力服務

TH 8:00AM-6:00PM F 8:00AM-5:00PM	 After Hours Phone: (619) 477-2159	Provider Gender: Male License Number: A108603 NPI: 1710171434
MORRISON REYES, JOSHUA, MD	Accepting New Patients: Yes	Provider English Spoken: Y Cultural Competency: Y
Provider Gender: Male License Number: A125435 NPI: 1235366782 Provider English Spoken: Y Indonesian, Spanish Cultural Competency: Y	 Site English Spoken: Y  Site Languages(s) Spoken: Arabic, Hindi, Spanish	WEST COAST EYE CARE
WEST COAST EYE CARE	American Sign Language (ASL): N	 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950
 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950	 Accessibility: CONTACT PROVIDER	 Phone: (619) 470-2700 Fax: (619) 267-8221
 Phone: (619) 470-2700 Fax: (619) 267-8221	Public transportation (within 1/2 mile from Site): 1T	 After Hours Phone: (619) 470-2700
 After Hours Phone: (619) 470-2700	 Hours: SU 10:00AM-4:00PM M-F 9:00AM-6:00PM SA 9:00AM-5:00PM	Accepting New Patients: Yes
Accepting New Patients: Yes		 Site English Spoken: Y
 Site English Spoken: Y		American Sign Language (ASL): N
American Sign Language (ASL): N		 Accessibility: CONTACT PROVIDER
 Accessibility: CONTACT PROVIDER	PATEL, SARJAN, MD	Public transportation (within 1/2 mile from Site): 1U
Public transportation (within 1/2 mile from Site): 1U	Provider Gender: Male License Number: A114976 NPI: 1316199326	 Hours: M-F 8:00AM-4:30PM
 Hours: M-F 8:00AM-4:30PM	Provider English Spoken: Y Gujarati, Hindi, Spanish Cultural Competency: Y	PRABHU, SUJATA, MD
	WEST COAST EYE CARE	Provider Gender: Female License Number: A115965 NPI: 1982872552
	 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950	Provider English Spoken: Y Spanish Cultural Competency: Y
	 Phone: (619) 470-2700 Fax: (619) 267-8221	WEST COAST EYE CARE
	 After Hours Phone: (619) 470-2700	 2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950
	Accepting New Patients: Yes	 Phone: (619) 470-2700 Fax: (619) 267-8221
	 Site English Spoken: Y	 After Hours Phone: (619) 470-2700
	American Sign Language (ASL): N	Accepting New Patients: Yes
	 Accessibility: CONTACT PROVIDER	 Site English Spoken: Y
	Public transportation (within 1/2 mile from Site): 1U	American Sign Language (ASL): N
	 Hours: M-F 8:00AM-4:30PM	
	PATEL, GITANE, MD	

D7. 視力提供者目錄 - 眼科和視力服務


 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

SCOTT, JEFFREY, OD

Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U


 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481


Provider English Spoken: Y
Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

D7. 視力提供者目錄 - 眼科和視力服務

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

WU, EVA, OD

Provider Gender: Female

License Number: 14743

NPI: 1073954442

Provider English Spoken: Y
Spanish, Chinese

Cultural Competency: Y

VIVE OPTOMETRY

1033 HIGHLAND AVE NATIONAL CITY, CA 91950

Phone: (619) 477-2771

Fax: (619) 477-1680

After Hours Phone: (619) 477-2771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

OCEANSIDE

KASAI, SARAH, OD

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): License Number: 6781

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

NISKANEN, RACHEL, OD

Provider Gender: Female

License Number: 34663

NPI: 1467065797

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

RING, ROBERT, OD

Provider Gender: Male

NPI: 1336228840

Provider English Spoken: Y

Cultural Competency: Y

ROBERT A RING OD

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

Phone: (760) 726-9383

Fax: (760) 726-9897

After Hours Phone: (760)
726-9383

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 10:00AM-6:00PM
TU 9:00AM-4:00PM
W 9:00AM-5:00PM
F 9:00AM-12:00AM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

D7. 視力提供者目錄 - 眼科和視力服務

N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T



 *Hours: M-TU*
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

RAMONA

HOMESLEY, SUSAN, OD

Provider Gender: Female
License Number: 6693
NPI: 1720068984
Provider English Spoken: Y
Spanish

Cultural Competency: Y
SUSAN D HOMESLEY OD


 1516 MAIN ST STE 102
RAMONA, CA 92065
 *Phone: (760) 789-0950*
Fax: (760) 789-6057


 *After Hours Phone: (760) 789-0950*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
8:00AM-5:00PM
SA 8:00AM-11:00AM

SAN DIEGO


ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774
NPI: 1629107172



Provider English Spoken: Y
Cultural Competency: Y
VAN HOOSE OPTOMETRIC CORPORATION

 7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111

 *Phone: (858) 292-7193*
Fax: (858) 292-8247

 *After Hours Phone: (858) 292-7193*

Accepting New Patients: Yes


 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T


 *Hours: M 8:00AM-5:00PM*
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM


ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521

Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 *Phone: (858) 309-7702*
Fax: (858) 966-8901

 *After Hours Phone: (858) 309-7702*


Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F*
7:00AM-5:00PM


AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650

Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111


 *Phone: (858) 565-8822*
Fax: (858) 565-2449

 *After Hours Phone: (858) 565-8822*

Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M 10:00AM-6:00PM*
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1780935650

Provider English Spoken: Y
Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y
Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

D7. 視力提供者目錄 - 眼科和視力服務

🕒 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

BERGMARK, JAMIE, OD

*Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y*

RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ *Phone: (858) 309-7702
Fax: (858) 966-8901*

🕒 *After Hours Phone: (858)
309-7702*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M-F
7:00AM-5:00PM*

BHATIA, SHAGUN, MD

*Provider Gender: Female
License Number: A154902
NPI: 1104237353*

*Provider English Spoken: Y
Cultural Competency: Y*

RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ *Phone: (858) 309-7702*

Fax: (858) 966-8901

🕒 *After Hours Phone: (858)
309-7702*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M-F
7:00AM-5:00PM*

BINDER, NICHOLAS, MD

*Provider Gender: Male
License Number: A124698
NPI: 1306076716*

*Provider English Spoken: Y
Cultural Competency: Y*

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ *Phone: (858) 565-8822
Fax: (858) 565-2449*

🕒 *After Hours Phone: (858)
565-8822*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM*

BINDER, NICHOLAS, MD

Provider Gender: Male

*License Number: A124698
NPI: 1306076716*

*Provider English Spoken: Y
Cultural Competency: Y*

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ *Phone: (619) 697-4600
Fax: (619) 697-2410*

🕒 *After Hours Phone: (619)
697-4600*

Accepting New Patients: Yes

🗒 *Site English Spoken: Y
American Sign Language (ASL):
N*

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

BOECK, CARL, OD

*Provider Gender: Male
License Number: 6620*

NPI: 1588656151

*Provider English Spoken: Y
German, Spanish*

Cultural Competency: Y

VAN HOOSE OPTOMETRIC
CORPORATION

📍 7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111

☎ *Phone: (858) 292-7193
Fax: (858) 292-8247*

🕒 *After Hours Phone: (858)
292-7193*

D7. 視力提供者目錄 - 眼科和視力服務


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158


NPI: 1215660436

Provider English Spoken: Y


Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

 After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436


Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

 Phone: (619) 295-2900

Fax: (888) 210-5799

 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158


NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 Phone: (619) 297-2020

Fax: (888) 210-5799

 After Hours Phone: (619)

297-2020

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

CHAIN, PEI CHI, OD

Provider Gender: Female

License Number: 34439

NPI: 1730676727

Provider English Spoken: Y


Spanish, Chinese

Cultural Competency: Y


SPOTLIGHT OPTOMETRY

 7835 HIGHLANDS VLG PL D
106

SAN DIEGO, CA 92129

 Phone: (858) 250-0052

Fax: (858) 788-0287

 After Hours Phone: (858)
250-0052


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
F 9:00AM-5:00PM

D7. 視力提供者目錄 - 眼科和視力服務

SA 9:00AM-1:00PM

CHEN, LESLIE, OD

Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Chinese

Cultural Competency: Y
EYE STUDIO OPTOMETRY

4475 UNIVERSITY AVE
SAN DIEGO, CA 92105

Phone: (619) 521-2020

Fax: (619) 521-2025

After Hours Phone: (619)
521-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-W
9:00AM-5:00PM
TH 9:00AM-1:30PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female
License Number: 13551
NPI: 1700040748

Provider English Spoken: Y
Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y
Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y
Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y
Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)

D7. 視力提供者目錄 - 眼科和視力服務

291-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DUONG, KIM, OD
Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 Phone: (858) 309-7702
Fax: (858) 966-8901
 After Hours Phone: (858) 309-7702

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
7:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female
License Number: 34070
NPI: 1366935678
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
 Phone: (858) 487-7900
Fax: (858) 487-1896
 After Hours Phone: (858) 487-7900
Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887

D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

NPI: 1275684847

Provider English Spoken: Y

Cultural Competency: Y

HEALTHY I CARE OPTOMETRY

10737 CAMINO RUIZ STE
220

SAN DIEGO, CA 92126

Phone: (619) 590-1994

Fax: (519) 590-9312

After Hours Phone: (619)
590-1994

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TH-F
9:00AM-5:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HOANG, KEVIN, OD

D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Male
License Number: 34401
NPI: 1790339216
Provider English Spoken: Y
Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938

After Hours Phone: (619)
284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOFFMAN, STEVEN, OD

Provider Gender: Male
License Number: 34561
NPI: 1033736079
Provider English Spoken: Y
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938

After Hours Phone: (619)
284-3937
Accepting New Patients: Yes
Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOM, GREGORY, OD

Provider Gender: Male
License Number: 9694
NPI: 1154473916
Provider English Spoken: Y
Cultural Competency: Y
GREGORY G HOM OD

11230 SORRENTO VLY RD
STE 145
SAN DIEGO, CA 92121
Phone: (858) 535-9835
Fax: (858) 535-1266
After Hours Phone: (858)
535-9835

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010

Provider English Spoken: Y
Spanish
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619)
543-6244

Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:00PM

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619)
697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within

D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

HUSTANA, LARA, OD

Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
French
Cultural Competency: Y

HILLCREST EYE
CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6244
Fax: (619) 295-5034
🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

HUYNH, LOAN, OD

Provider Gender: Female
License Number: 34472
NPI: 1003454604
Provider English Spoken: Y
Vietnamese

Cultural Competency: Y
NORTH COUNTY OPTOMETRY

📍 11835 CARMEL MTN RD STE
1313
SAN DIEGO, CA 92128
☎ Phone: (858) 674-1276
Fax: (858) 674-5863
🕒 After Hours Phone: (858)
674-1276

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-7:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

HUYNH, PAUL, MD

Provider Gender: Male
License Number: A79141
NPI: 1871577056

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y
ADVANCED EYE AND LASER
CTR OF CA INC

📍 10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126
☎ Phone: (858) 549-3200
Fax: (858) 549-3207
🕒 After Hours Phone: (858)
549-3200

Accepting New Patients: Yes

📄 Site English Spoken: Y
📄 Site Language(s) Spoken:
Spanish, Tagalog,

Vietnamese

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

HUYNH, CHI, OD

Provider Gender: Female
License Number: 12901
NPI: 1922187426

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

CRYSTAL EYESITE
OPTOMETRY

📍 9225 MIRA MESA BLVD STE
108
SAN DIEGO, CA 92126
☎ Phone: (858) 547-3988
Fax: (844) 367-5161

🕒 After Hours Phone: (858)
547-3988

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:30AM-6:00PM
W 9:30AM-6:00PM
TH-F 10:00AM-6:00PM
SA 9:00AM-3:00PM

HUYNH, PAUL, MD

Provider Gender: Male
License Number: A79141

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1871577056

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER
CTR OF CA INC

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)
283-1303

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410



After Hours Phone: (619)
697-4600

Accepting New Patients: Yes



Site English Spoken: Y
American Sign Language (ASL):

N



D7. 視力提供者目錄 - 眼科和視力服務

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIGHI, PAYMAN, OD

Provider Gender: Male
License Number: 13014
NPI: 1396897880
Provider English Spoken: Y
Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC
 4029 43RD ST STE 300
SAN DIEGO, CA 92105
 Phone: (619) 284-3937
Fax: (619) 284-3938
 After Hours Phone: (619) 284-3937

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

KHALIL, VADY, OD




Provider Gender: Male
License Number: 35137
NPI: 1275263584

Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHAN, FAHAD, MD



Provider Gender: Male
License Number: A163142
NPI: 1548605843
Provider English Spoken: Y
Hindi

Cultural Competency: Y
VISION SPECIALISTS OF CALIFORNIA

 233 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (619) 501-9050
Fax: (619) 501-9054

 After Hours Phone: (619) 501-9050

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Bengali, Hindi, Spanish
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE
CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE
CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

D7. 視力提供者目錄 - 眼科和視力服務

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244
Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

LARSEN, STEVEN, OD

Provider Gender: Male
License Number: 7687
NPI: 1629194782
Provider English Spoken: Y
Spanish
Cultural Competency: Y
UPTOWN OPTOMETRY

4096 PARK BLVD
SAN DIEGO, CA 92103

Phone: (619) 291-5505
Fax: (619) 291-4404

After Hours Phone: (619)
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male
License Number: 11166
NPI: 1821001645

Provider English Spoken: Y
Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020
Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108

Phone: (619) 295-2900
Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LAU, JANICE, OD

Provider Gender: Female
License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128
Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

D7. 視力提供者目錄 - 眼科和視力服務

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-TU
 9:00AM-5:00PM
 W 10:00AM-6:00PM
 TH 9:00AM-5:00PM
 F 10:00AM-6:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male
 License Number: 11166
 NPI: 1821001645
 Provider English Spoken: Y
 Cultural Competency: Y
 OPTOM-EYES VISION CARE
 OPTOMETRY
 1555 PALM AVE STE A2
 SAN DIEGO, CA 92154
 Phone: (619) 297-2020
 Fax: (888) 210-5799
 After Hours Phone: (619) 297-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 9:30AM-6:00PM
 SA 9:00AM-3:00PM

LE, JACQUELIN, OD

Provider Gender: Female
 License Number: 10962
 NPI: 1487610432
 Provider English Spoken: Y
 Spanish, Vietnamese
 Cultural Competency: Y
 SAN DIEGO VISION CARE
 OPTOMETRY
 3807 FAIRMOUNT AVE STE 200
 SAN DIEGO, CA 92105
 Phone: (619) 508-5678
 Fax: (619) 501-0686

After Hours Phone: (619) 508-5678
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 9:00AM-5:00PM

LEE, JASON, OD

Provider Gender: Male
 License Number: 14881
 NPI: 1679985584
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 RADY CHILDRENS
 SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123
 Phone: (858) 309-7702
 Fax: (858) 966-8901

After Hours Phone: (858) 309-7702
 Accepting New Patients: Yes
 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 7:00AM-5:00PM

LIN, HENRY, OD

Provider Gender: Male
 License Number: 11368
 NPI: 1861405664
 Provider English Spoken: Y
 Spanish, Chinese
 Cultural Competency: Y
 OPTOM-EYES VISION CARE
 OPTOMETRY
 5638 MISSION CENTER RD STE 103
 SAN DIEGO, CA 92108
 Phone: (619) 295-2900
 Fax: (888) 210-5799
 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-5:30PM
 SA 9:00AM-3:00PM

D7. 視力提供者目錄 - 眼科和視力服務

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

FASHION VALLEY EYE CARE

OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LLANES, BENJAMIN, OD

Provider Gender: Male

License Number: 8782

NPI: 1053309005

Provider English Spoken: Y

Spanish, Tagalog

Cultural Competency: Y

SEE KLEER EYECARE CENTER

9580 BLACK MOUNTAIN
RD STE J
SAN DIEGO, CA 92126

Phone: (858) 536-8952

Fax: (858) 536-8951

After Hours Phone: (858)
536-8952

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH

11:00AM-6:00PM

F 1:00PM-5:00PM

SA 9:00AM-1:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

D7. 視力提供者目錄 - 眼科和視力服務

☎ After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female

License Number: 15001

NPI: 1962817981

Provider English Spoken: Y
Spanish

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

☎ After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

☎ After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

☎ Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

🕒 After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)

565-8822

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM

W 7:30AM-4:00PM

TH 9:30AM-5:00PM

F 8:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗪 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER






















Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM

W 8:30AM-5:00PM

TH 8:00AM-6:00PM

D7. 視力提供者目錄 - 眼科和視力服務

<p>F 8:00AM-4:00PM</p> <p>NGUYEN, KELVIN, OD Provider Gender: Male License Number: 11085 NPI: 1518923572 Provider English Spoken: Y Spanish Cultural Competency: Y SAN DIEGO VISION CARE OPTOMETRY</p> <p> 3807 FAIRMOUNT AVE STE 200 SAN DIEGO, CA 92105</p> <p> Phone: (619) 508-5678 Fax: (619) 501-0686</p> <p> After Hours Phone: (619) 508-5678</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p> Hours: M-F 9:00AM-5:00PM</p>	<p> Phone: (619) 284-3937 Fax: (619) 284-3938</p> <p> After Hours Phone: (619) 284-3937</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p> Hours: M-F 9:00AM-5:00PM SA 9:00AM-1:00PM</p>	<p> Hours: M-F 9:00AM-5:00PM SA 9:00AM-1:00PM</p> <p>NGUYEN, HOA PHUONG, OD Provider Gender: Female License Number: 12630 NPI: 1962439265 Provider English Spoken: Y Vietnamese Cultural Competency: Y COLLEGE GROVE OPTOMETRY</p> <p> 4560 COLLEGE AVE SAN DIEGO, CA 92115</p> <p> Phone: (619) 583-5744 Fax: (619) 582-6112</p> <p> After Hours Phone: (619) 583-5744</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p> Hours: M-F 9:00AM-5:00PM</p>
<p>NGUYEN, JASMINE, OD Provider Gender: Female License Number: 11189 NPI: 1497896922 Provider English Spoken: Y Vietnamese Cultural Competency: Y JASMINE P NGUYEN OD INC</p> <p> 4029 43RD ST STE 300 SAN DIEGO, CA 92105</p>	<p>NGUYEN, THANH, OD Provider Gender: Female License Number: 13126 NPI: 1992813323 Provider English Spoken: Y Vietnamese Cultural Competency: Y JASMINE P NGUYEN OD INC</p> <p> 4029 43RD ST STE 300 SAN DIEGO, CA 92105</p> <p> Phone: (619) 284-3937 Fax: (619) 284-3938</p> <p> After Hours Phone: (619) 284-3937</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p>	<p>NGUYEN, BRUCE, OD Provider Gender: Male License Number: 14156 NPI: 1376839019 Provider English Spoken: Y Vietnamese Cultural Competency: Y CLAIREMONT OPTOMETRY</p> <p> 10715 TIERRASANTA BLVD STE F SAN DIEGO, CA 92124</p>

D7. 視力提供者目錄 - 眼科和視力服務

☎ Phone: (858) 279-6500
Fax: (858) 225-7174

🕒 After Hours Phone: (858)
279-6500

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-W
9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 8:00AM-3:00PM

NGUYEN, THANH, OD

Provider Gender: Female

License Number: 13126

NPI: 1992813323

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

📍 12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128

☎ Phone: (858) 748-1265

Fax: (844) 269-9527

🕒 After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y
German, Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

D7. 視力提供者目錄 - 眼科和視力服務

🕒 *Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM*

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ *Phone: (619) 697-4600*

Fax: (619) 697-2410

🕒 *After Hours Phone: (619)
697-4600*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD

SAN DIEGO, CA 92115

☎ *Phone: (619) 697-4600*

Fax: (619) 697-2410

🕒 *After Hours Phone: (619)
697-4600*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

PHAM, TONY, OD

Provider Gender: Male

License Number: 12348

NPI: 1841271434

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

MIRA MESA EYECARE

📍 6755 MIRA MESA BLVD STE
141

SAN DIEGO, CA 92121

☎ *Phone: (858) 535-8282*

Fax: (858) 535-0537

🕒 *After Hours Phone: (858)
535-8282*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*

☐ *Site Languages(s) Spoken:*

Spanish, Vietnamese

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M-TU
9:30AM-6:00PM
TH-F 9:30AM-6:00PM*

PHUNG, RICHARD N V, OD

Provider Gender: Male

License Number: 9547

NPI: 1689661571

Provider English Spoken: Y

Vietnamese, Chinese

Cultural Competency: Y

SCRIPPS RANCH OPTOMETRI
CTR

📍 9880 HIBERT ST STE E1
SAN DIEGO, CA 92131

☎ *Phone: (858) 693-9044*

Fax: (858) 693-0704

🕒 *After Hours Phone: (858)
693-9044*

Accepting New Patients: Yes

☐ *Site English Spoken: Y*

☐ *Site Languages(s) Spoken:
Vietnamese*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 10:00AM-6:00PM
TU 10:00AM-2:00PM
W-TH 10:00AM-6:00PM
F 9:00AM-2:00PM
SA 9:00AM-2:00PM*

POUSTI, SHEIVA, OD

Provider Gender: Female

License Number: 10403

NPI: 1730240052

Provider English Spoken: Y

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

SAN DIEGO EYE CLINIC
OPTOMETRY

📍 3560 FAIRMOUNT AVE STE
A

SAN DIEGO, CA 92105

☎ Phone: (619) 431-2020

Fax: (619) 376-2100

🕒 After Hours Phone: (619)
431-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU-SA
9:00AM-6:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

*Public transportation (within
1/2 mile from Site): 1U*

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

SANDOC, EMILY, OD

Provider Gender: Female

License Number: 13535

NPI: 1992969794

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

📍 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900

Fax: (888) 210-5799

🕒 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

SHULKIN, MITCHELL, OD

Provider Gender: Male

License Number: 8153

NPI: 1770531865

Provider English Spoken: Y

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

📍 11835 CARMEL MTN RD STE
1313

SAN DIEGO, CA 92128

☎ Phone: (858) 674-1276

Fax: (858) 674-5863

🕒 After Hours Phone: (858)
674-1276

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog


D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL): Provider Gender: Male

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-7:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM*

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420


NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108

 *Phone: (619) 295-2900*

Fax: (888) 210-5799

 *After Hours Phone: (619)
295-2900*


Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1U

 *Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM*

SOLIS, KEVIN, OD


License Number: 10420


NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

 *Phone: (619) 291-2020*

Fax: (888) 210-5799

 *After Hours Phone: (619)
291-2020*

Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM*

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420


NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 *Phone: (619) 297-2020*

Fax: (888) 210-5799

 *After Hours Phone: (619)
297-2020*


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM*

TA, TRANG, OD

Provider Gender: Female


License Number: 12100


NPI: 1518381045

Provider English Spoken: Y
Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300
SAN DIEGO, CA 92105

 *Phone: (619) 284-3937*

Fax: (619) 284-3938

 *After Hours Phone: (619)
284-3937*


Accepting New Patients: Yes

Site English Spoken: Y


*Site Languages(s) Spoken:
Spanish, Vietnamese*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T

 *Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM*

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1548255896

Provider English Spoken: Y
Spanish

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y
Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300

SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600


Accepting New Patients: Yes

Site English Spoken: Y


D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL): NPI: 1679521280

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318


Provider English Spoken: Y

Vietnamese


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280


Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 697-4600

Fax: (619) 697-2410

 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790


Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-8901

 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
7:00AM-5:00PM

TRANG, CHAU, OD

Provider Gender: Female

License Number: 9556

NPI: 1073671087

Provider English Spoken: Y

French, Spanish, Vietnamese,

D7. 視力提供者目錄 - 眼科和視力服務

Chinese

Cultural Competency: Y

CHAU H TRANG OD

6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

Phone: (858) 495-0592

Fax: (858) 495-0560

After Hours Phone: (858) 495-0592

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 10:00AM-3:00PM
W 10:00AM-3:00PM
F 10:00AM-5:00PM
SA 9:00AM-1:00PM

TU, CHARLES, OD

Provider Gender: Male

License Number: 34618

NPI: 1073137691

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): License Number: 33798

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9:30AM-6:00PM
SA 9:00AM-3:00PM

VAN HOOSE, MARC, OD

Provider Gender: Male

License Number: 12667

NPI: 1932280054

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103




Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619) 543-6244


Accepting New Patients: Yes


D7. 視力提供者目錄 - 眼科和視力服務




 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

YU, CAROL, OD

Provider Gender: Female
 License Number: 34047
 NPI: 1639697451
 Provider English Spoken: Y
 Spanish, Chinese
 Cultural Competency: Y
 HILLCREST EYE
 CENTER-UCSD




 4060 4TH AVE STE 610
 SAN DIEGO, CA 92103
 Phone: (619) 543-6244
 Fax: (619) 295-5034

 After Hours Phone: (619)
 543-6244
 Accepting New Patients: Yes

 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-4:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
 License Number: C186414
 NPI: 1952659203
 Provider English Spoken: Y



Cultural Competency: Y
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858)
 565-8822
 Accepting New Patients: Yes




 Site English Spoken: Y
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM



SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male
 License Number: A160988
 NPI: 1609258920
 Provider English Spoken: Y
 Spanish



Cultural Competency: Y
 RSF OPHTHALMOLOGY
 100 N RANCHO SNTA FE
 RD STE 12
 SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 249-7394


 After Hours Phone: (760)
 598-0400
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:


Spanish, Thai
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

GUAN, HOWARD, MD

Provider Gender: Male
 License Number: A119766
 NPI: 1134427636
 Provider English Spoken: Y
 Spanish, Chinese
 Cultural Competency: Y
 RSF OPHTHALMOLOGY

 100 N RANCHO SNTA FE
 RD STE 12
 SAN MARCOS, CA 92069
 Phone: (760) 598-0400
 Fax: (760) 249-7394

 After Hours Phone: (760)
 598-0400
 Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish, Thai
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

PRESTERA, TORY, MD

Provider Gender: Male
 License Number: A62321
 NPI: 1346224557

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Provider English Spoken: Y
Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE
RD STE 12
SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760)
598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

SKAY, RICHARD, OD

Provider Gender: Male

License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

RICHARD M SKAY OD

1903 W SAN MARCOS
BLVD STE 130
SAN MARCOS, CA 92078

Phone: (760) 727-2211

Fax: (760) 727-2533

After Hours Phone: (760)
727-2211

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-3:00PM

TA, MINI, OD

Provider Gender: Female

License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101
SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)
736-0020

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

D7. 視力提供者目錄 - 眼科和視力服務

N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 **Hours:** M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

SPRING VALLEY

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461


NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318


Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 **Hours:** M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207


NPI: 1740868603

Provider English Spoken: Y


Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 **Hours:** M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100


NPI: 1568861425

Provider English Spoken: Y


Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619)
463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 **Hours:** M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

KALRA, ANKUR, OD

Provider Gender: Male


License Number: 11898

NPI: 1124195789

Provider English Spoken: Y
Hindi

Cultural Competency: Y
EYE CARE OPTOMETRY
ASSOCIATES

 687 SWEETWATER RD
SPRING VALLEY, CA 91977

 Phone: (619) 466-9444

Fax: (619) 466-9314

 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes


Site English Spoken: Y
 Site Language(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 **Hours:** M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Spanish

D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444

Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444

Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL): Provider English Spoken: Y
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444

Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Cultural Competency: Y
EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444

Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y
Arabic

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444

Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

D7. 視力提供者目錄 - 眼科和視力服務

Arabic, Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 ⌚ Hours: M-F
 9:00AM-6:00PM
 SA 9:00AM-5:00PM

VALLEY CENTER

GRASSO, GINA, OD

Provider Gender: Female
 License Number: 11139TLG
 NPI: 1700899952
 Provider English Spoken: Y
 Cultural Competency: Y
 VALLEY CENTER OPTOMETRY
 29115 VALLEY CENTER RD
 STE E
 VALLEY CENTER, CA 92082
 ☎ Phone: (760) 751-8771
 Fax: (760) 751-8772
 📞 After Hours Phone: (760)
 751-8771

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 ⌚ Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833
 NPI: 1275585127
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 VALLEY CENTER OPTOMETRY
 29115 VALLEY CENTER RD
 STE E
 VALLEY CENTER, CA 92082
 ☎ Phone: (760) 751-8771
 Fax: (760) 751-8772

📞 After Hours Phone: (760)
 751-8771
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 ⌚ Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

LE, TAM, OD

Provider Gender: Female
 License Number: 12951
 NPI: 1235268707
 Provider English Spoken: Y
 Spanish, Vietnamese
 Cultural Competency: Y
 VALLEY CENTER OPTOMETRY
 29115 VALLEY CENTER RD
 STE E
 VALLEY CENTER, CA 92082
 ☎ Phone: (760) 751-8771
 Fax: (760) 751-8772
 📞 After Hours Phone: (760)
 751-8771
 Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 ⌚ Hours: M 9:00AM-6:00PM
 TU-F 9:00AM-5:00PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male
 License Number: 8954
 NPI: 1508932518
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 SHADOWRIDGE FAMILY
 VISION
 741 SHADOWRIDGE DR
 VISTA, CA 92083
 ☎ Phone: (760) 727-1844
 Fax: (760) 727-3044
 📞 After Hours Phone: (760)
 727-1844
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 ⌚ Hours: M-TU
 9:00AM-6:00PM
 W 7:00AM-5:00PM

D7. 視力提供者目錄 - 眼科和視力服務

TH 9:00AM-6:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551


Provider English Spoken: Y

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 931 ANZA AVE STE B
VISTA, CA 92084

 Phone: (760) 758-2340

Fax: (760) 867-2222

 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948


Provider English Spoken: Y

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 931 ANZA AVE STE B
VISTA, CA 92084

 Phone: (760) 758-2340

Fax: (760) 867-2222

 After Hours Phone: (760)
758-2340

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y
Vietnamese


Cultural Competency: Y

KINDERSPECS-GOOD EYES

OPTOMETRY

 110 CIVIC CENTER DR STE
204

VISTA, CA 92084

 Phone: (760) 753-3665

Fax: (408) 969-1653

 After Hours Phone: (760)
753-3665


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TH
10:00AM-5:00PM

D8. 其他服務提供者


SAN MARCOS


AMERICARE ADULT DAY HEALTH CARE CENTER†

License Number: 060000832


 340 RANCHEROS DR STE
196

SAN MARCOS, CA 92069

 *Phone: (760) 682-2424*

 *After Hours Phone: (760)
682-2424*

 *Site English Spoken: Y*

 *Accessibility: CONTACT
PROVIDER*

 *Website: [www.americaread
hc.com](http://www.americaread
hc.com)*

Cultural Competency: N

Accepting New Patients: No

D9. Blue Shield Promise 緊急護理設施

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Languages(s) Spoken:
Spanish

SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

(619) 736-4600
SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
<https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
<https://www.afcurgentcare.com/san-diego/>
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880


AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111








(858) 800-2880

D9. Blue Shield Promise 緊急護理設施

 (858) 800-2880
 SU-SA 8:00AM-8:00PM
 *Accessibility:* CONTACT PROVIDER
 <https://www.afurgentcare.com/san-diego/>
Accepting New Patients: No






SANTEE

AFC URGENT CARE OF SANTEE*






NPI: 1396058137
 10538 MISSION GORGE RD STE 100
SANTEE, CA 92071
 (619) 456-0033
 (619) 456-0033
 Site Languages(s) Spoken: Arabic, Spanish
 SU-SA 8:00AM-8:00PM
 *Accessibility:* CONTACT PROVIDER
 www.afurgentcare.com/santee/
Accepting New Patients: No

CHULA VISTA






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED

FNDTN*
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

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 386 E H ST STE 202
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Accepting New Patients: No

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 386 E H ST STE 202

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 N/A
Accepting New Patients: No





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Accepting New Patients: No






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CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT






D9. Blue Shield Promise 緊急護理設施

 PROVIDER
N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

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Accepting New Patients: No






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 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No






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 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

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 N/A
Accepting New Patients: No




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Accepting New Patients: No






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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED

FNDTN*
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

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 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*



NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202

D9. Blue Shield Promise 緊急護理設施






 CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT

PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
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Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
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 386 E H ST STE 202
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 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN***
NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
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 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**


D9. Blue Shield Promise 緊急護理設施

FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No


ESCONDIDO


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*


NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

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STE 100

ESCONDIDO, CA 92029

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RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

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 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

D9. Blue Shield Promise 緊急護理設施


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT
PROVIDER*

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

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STE 100

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 (760) 755-7600

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 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT
PROVIDER*

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility: CONTACT*

PROVIDER

 N/A


Accepting New Patients: No


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RADY CHILDRENS


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FNDTN*

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FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 (760) 294-9270

 (760) 294-9270

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
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 N/A

Accepting New Patients: No

LA MESA


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (858) 576-1700

 (858) 576-1700

 *Accessibility:* CONTACT
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED


D9. Blue Shield Promise 緊急護理設施

FNDTN*

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RADY CHILDRENS


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FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


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NPI: 1669617197

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 (619) 713-5375
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





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 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197
 5565 GROSSMONT
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LA MESA, CA 91942
 (619) 713-5375
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D9. Blue Shield Promise 緊急護理設施


OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

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SAN DIEGO

RADY CHILDRENS

D9. Blue Shield Promise 緊急護理設施


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

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FNDTN*

NPI: 1669617197

D9. Blue Shield Promise 緊急護理設施

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 (619) 280-2905
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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





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 4305 UNIVERSITY AVE STE 150
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 4305 UNIVERSITY AVE STE 150

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 (619) 280-2905
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
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D9. Blue Shield Promise 緊急護理設施






PROVIDER
 N/A
Accepting New Patients: No

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NPI: 1669617197

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

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Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

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RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

(619) 280-2905

(619) 280-2905

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N/A

Accepting New Patients: No

LA MESA

RCH EAST COUNTY URGENT CARE*

NPI: 1710065933

5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

(619) 713-5375

(619) 713-5375

SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Accessibility: CONTACT
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Accepting New Patients: No

SAN DIEGO

RCH MID CITY URGENT CARE*

NPI: 1710065933

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

(619) 280-2905

(619) 280-2905

SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

ESCONDIDO

RCH NORTH COUNTY URGENT CARE*

NPI: 1710065933

625 CITRACADO PKWY STE
100

ESCONDIDO, CA 92025

(760) 739-1543

(760) 739-1543

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Accepting New Patients: No

OCEANSIDE

RCH OCEANSIDE URGENT CARE*

NPI: 1710065933

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

(760) 547-1000

(760) 547-1000

SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Accessibility: CONTACT
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Accepting New Patients: No

SAN DIEGO

SOUTHBAY URGENT CARE INC*

NPI: 1558746750

1628 PALM AVE
SAN DIEGO, CA 92154

(619) 591-9999

(619) 591-9999

Site Languages(s) Spoken:
Spanish, Vietnamese

SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM

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[https://www.southbayurgen-
ntcare.com/](https://www.southbayurgen-
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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Multi-Language Insert Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-452-4413. Someone who speaks English can help you. This is a free service.

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Navajo D77 ats'77s baa lhly3 47 doodago azee' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoonih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-452-4413 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo]. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਬਾਸੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਬਾਸੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-452-4413 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទទមកយើងខ្ញុំតាមលេខ 1-800-452-4413។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-452-4413. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպության հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافایت با ما به شماره 1-800-452-4413 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี

Multi-Language Insert
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Navajo D77 ats'77s baa lhly3 47 doodago azeé' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoolnih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-776-4466 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo[. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਆਰਾ ਸੇਵਾ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਆਰਾ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-776-4466 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានាដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់សូមទូរស័ព្ទមកយើងខ្ញុំតាមលេខ 1-800-776-4466។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-776-4466. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ບີ 1-800-776-4466. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ນີ້ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ քոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչներին հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ ունենալու համար պարզապես զանգահարեք մեզ 1-800-776-4466 հեռախոսահամարով: Ձեզ կօգնի հարցերին իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-776-4466 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-776-4466 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี



LANGUAGE ASSISTANCE NOTICE

English ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请注意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711) 번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi

توجه: اگر به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413- 4413 (TTY: 711)، از ساعت 8:00 صبح تا 8:00 شب در هفت روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। फ़ोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सातों दिन। फ़ोन करना फ़्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntxov txog 8:00 teev tsaus ntu, xya hnuv hauv ib lub as thiv. Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.

Tiếng Việt Vietnamese LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẽ cung cấp miễn phí dịch vụ hỗ trợ ngôn ngữ cho quý vị. Gọi số 1-800-452-4413 (TTY: 711), 8 giờ sáng đến 8 giờ tối, bảy ngày trong tuần. Cuộc gọi này miễn phí.

Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na lib्रेng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.

العربية Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 1-800-452-4413 (TTY: 711)، من الساعة 8:00 صباحًا إلى 8:00 مساءً طوال أيام الأسبوع. علمًا بأن هذه المكالمات مجانية.

ພາສາລາວ Laotian ສິ່ງສຳຄັນ: ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການຊ່ວຍເຫຼືອທາງດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-800-452-4413 (TTY: 711), 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ, ເຈັດວັນຕໍ່ອາທິດ. ການໂທແມ່ນບໍ່ເສຍຄ່າ.

日本語 Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-452-4413 (TTY: 711) まで、お電話にてご連絡ください。毎日午前 8 時から午後 8 時まで受け付けています。通話は無料です。

ภาษาไทย Thai

เรียน หากคุณพูดภาษา ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาให้แก่คุณโดยไม่มีค่าใช้จ่าย โทร 1-800-452-4413 (TTY: 711) 8:00 น. ถึง 20:00 น. ได้ตลอดเจ็ดวันต่อสัปดาห์ โทรฟรี ไม่มีค่าใช้จ่าย

ਪੰਜਾਬੀ Punjabi ਸਾਵਧਾਨ : ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਉਪਲਬਧ ਹਨ | ਕਾਲ ਕਰੋ 1-800-452-4413 (TTY: 711), ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8:00 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ. ਕਾਲ ਫ੍ਰੀ ਹੈ |

ខ្មែរ Khmer ចាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសា គឺមានសំរាប់អ្នក ដោយឥតគិតថ្លៃ។ ហៅ 1-800-452-4413 (TTY: 711) ម៉ោង 8:00 ព្រឹក ដល់ 8:00 យប់ ប្រាំពីរថ្ងៃមួយអាទិត្យ។ គឺឥតគិតថ្លៃទេ។

Հայերեն Armenian ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահայեր 1-800-452-4413 (TTY՝ 711) համարով, 8:00-ից 20:00, շաբաթը յոթ օր: Հեռախոսազանգն անվճար է:

Українська Ukrainian ЗВЕРНІТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh nzie weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorx taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungnh ndorm mingh taux 8:00 ziangh hoc lungnh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.

Notes

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